2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000145607

FILED Oct 19, 2004 Secretary of State

Entity Name: PREMIER SPECIALIST MEDICAL CENTER INC

Entity Name: PREMIER	SPECIALIST MEDICAL CEN	IER, INC.		
Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
42 NW 27TH AVENUE SUITE #308 MIAMI, FL 33125				
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
42 NW 27TH AVENUE SUITE #308 MIAMI, FL 33125				
FEI Number: 75-3139323	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
DOMINGUEZ, EMILENES 8095 NW 23TH COURT SUITE #1 MIAMI, FL 33126 US	5			
The above named entity s in the State of Florida.	submits this statement for the p	urpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		ent	Date	
	3(2)(b), F.S., the corporation did no 1 Trust Fund Contribution ().	t receive the prior notice.		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: D () Name: COLAS, ARNOL Address: 2411 NW 23RD City-St-Zip: MIAMI, FL 331	COURT #1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: D () Name: DOMINGUEZ, E Address: 8095 NW 8TH S City-St-Zip: MIAMI, FL 331:	STREET #207	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARNOLDO COLAS D 10/19/2004