

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000024546

**FILED**  
**Jun 22, 2006**  
**Secretary of State**

**Entity Name:** HOUSE CALL DOCTORS OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

7400 N KENDALL DRIVE SUITE 303  
MIAMI, FL 33156

**New Principal Place of Business:**

13375 SW 128 ST.  
109A  
MIAMI, FL 33186

**Current Mailing Address:**

7400 N KENDALL DRIVE SUITE 303  
MIAMI, FL 33156

**New Mailing Address:**

13375 SW 128 ST.  
109A  
MIAMI, FL 33186

**FEI Number:** 20-0702572

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FALCON, ARMANDO A  
11545 SW 152ND COURT  
MIAMI, FL 33196 US

**Name and Address of New Registered Agent:**

FALCON, ARMANDO A  
13375 SW 128 ST.  
109A  
MIAMI, FL 33186 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ARMANDO A. FALCON

06/22/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FALCON, ARMANDO A  
Address: 11545 SW 152ND COURT  
City-St-Zip: MIAMI, FL 33196

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: FALCON, ARMANDO A  
Address: 13375 SW 128 ST.  
City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ARMANDO A. FALCON

P

06/22/2006

Electronic Signature of Signing Officer or Director

Date