

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000052330

Entity Name: MARK D. HOBSON, P.A.

**FILED**  
**May 05, 2014**  
**Secretary of State**

## **Current Principal Place of Business:**

777 BRICKELL AVENUE  
SUITE 850  
MIAMI, FL 33131

## **New Principal Place of Business:**

135 SAN LORENZO AVENUE  
# 660  
CORAL GABLES, FL 33146

## **Current Mailing Address:**

777 BRICKELL AVENUE  
SUITE 850  
MIAMI, FL 33131

## **New Mailing Address:**

135 SAN LORENZO AVENUE  
# 660  
CORAL GABLES, FL 33146

FEI Number: 20-0916102

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

HOBSON, MARK D  
777 BRICKELL AVENUE  
SUITE 850  
MIAMI, FL 33131 US

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

HOBSON, MARK D  
135 SAN LORENZO AVENUE  
# 660  
CORAL GABLES, FL 33146 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: MARK D. HOBSON

05/05/2014

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: P, S  
Name: HOBSON, MARK D  
Address: 257 S.W. 32ND ROAD  
City-St-Zip: MIAMI, FL 33129

I hereby 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 all other like empowered.

SIGNATURE: MARK D. HOBSON

P

05/05/2014

Electronic Signature of Signing Officer or Director

Date