

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000064603

FILED
Nov 10, 2005
Secretary of State

Entity Name: DOCTOR'S CHOICE HOME HEALTH, INC.

Current Principal Place of Business:

800 E CYPRESS CREEK ROAD SUITE 203
FORT LAUDERDALE, FL 33334

New Principal Place of Business:

Current Mailing Address:

800 E CYPRESS CREEK ROAD SUITE 203
FORT LAUDERDALE, FL 33334

New Mailing Address:

FEI Number: 20-1019641

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARCUS, ALAN J ESQ
20803 BISCAYNE BLVD SUITE 301
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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: ALAN J. MARCUS

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: D () Delete
Name: MARCUS, ALAN J
Address: 800 E CYPRESS CREEK ROAD SUITE 203
City-St-Zip: FORT LAUDERDALE, FL 33334

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WITTELS, MICHAEL B
Address: 800 E CYPRESS CREEK ROAD SUITE 203
City-St-Zip: FORT LAUDERDALE, FL 33334

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: MICHAEL B. WITTELS

D

11/10/2005

Electronic Signature of Signing Officer or Director

Date