2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000079642

Entity Name: NEW PEACE MEDICAL CENTER, INC.

FILED Oct 15, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2200 SW 8 MIAMI, FL					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
2200 SW 8 MIAMI, FL					
FEI Number:		FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
GOVEA, C 2200 SW 8 MIAMI, FL		S			
The above in the State		submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE: CARDAD	GOVEA			
	Electron	ic Signature of Registered Age	ent	Date	
		8(2)(b), F.S., the corporation did no Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () GOVEA, CARID 2200 SW 8TH 0 MIAMI, FL 3318	т	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: CARIDAD GOVEA PD 10/15/2005