2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000087658

Entity Name: DAVINA MEDICAL CARE, P.A.

FILED Sep 21, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

151 NW 11TH STREET E-304 HOMESTEAD, FL 33030

Current Mailing Address: New Mailing Address:

151 NW 11TH STREET E-304 HOMESTEAD, FL 33030

FEI Number: 34-1997606 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LOPEZ-LUCIANO, LUISA M MD 151 NW 11TH STREET E-304 HOMESTEAD, FL 33030 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: DR. LUISA LOPEZ-LUCIANO

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: DR (X) Change () Addition Name: LOPEZ-LUCIANO, LUISA M MD Name: LOPEZ-LUCIANO, LUISA M MD Address: 888 BRICKELL KEY DR - APT 2012 888 BRICKELL KEY DR - APT 2012

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify 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: LUISA LOPEZ-LUCIANO DR 09/21/2007