

## 2006 FOR PROFIT CORPÓRATION REINSTATEMENT

DOCUMENT # P04000092206  1. Entity Name FELIX ANDARSIO, D.O., P.A.					711_210 06 JAN 17 PH 12: 40			
Principal Place of Business 10111 FOREST HILL BLVD SUITE # 231 WELLINGTON, FL 33414 US		Mailing Address 1394 BEACON CIRCLE WELLINGTON, FL 33414 US		s	] 		FIT BERN 18110 KIRIN 1788 8	
	Place of Business Sceet Hill 13LVD	3. Malling Address						
Suite, Apl. #, etc. # 261		Suite, Apt. #, etc.			01102008	REIN-P	CR2E098 (11	/05)
wein	ington, FL	City & State			4. FEI Number	1 7 - 1 / 4	47	Applied For Not Applicable
33414 Palu Bea		<u> </u>		fry 5. Certificate of		of Status Desired	Féé Required	
6. Name and Address of Current Registered Agent 7. Name and Address of Name .							legistered Agent	
1394 BEA	O, FELIX JR. CON CIRCLE TON, FL 33414			Street Address (P.O. Box Number is Not Acceptable)				
				City			FL Zip	Code
8. 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, I am familiar with, and accept the obligations of registered agent.  SIGNATURE  SIGNATUR								
	LE NOW!!! FEE 18 \$900.00							
10.	OFFICERS AND C	DIRECTORS  Director	11. 117LE	: "	ADDITIONS/C	HANGES TO OFF	IÇERŞ AND DIREC	
NAMÉ STREET ADORESS GITY-ST-ZIP	ANDARSIO, FELIX JR. 1394 BEACON CIRCLE WELLINGTON, FL 33414			e et address -st-zip		800th		0108 2 **300.30
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12. I hereby certify that the Information supplied with this filling does not quality for the exemptions contained in Chapter 119. Florida Statutas. I further cortify that the information indicated on this report or supplemental report is true early accurate and that my signature shall have the same legal effect as if made under eath, that I am an efficier or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 807. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.								

Pagerol

## Felix Andarsio, D.O., F.A.C.O.G. Obstetrics & Gynecology Fellow American College of OB/GYN – Board Certified

10111 Forest Hill Blvd, Suite # 261 Wellington, Florida 33414 PH: (561) 784-1099 FAX: (561) 784-1081

January 10th, 2006

Division of Corporations P.O. Box 6327 Tallahassee, FI 32314

RE: Document # P04000092206

To whom it may concern:

I have realized that my corporation appears as inactive as of 09/15/05. My principal place of business has moved to a different suite however my mailing address has not changed. I never received any information to renew my corporation and since this is my first year of owning a corporation, I did not know I had to renew each year or the actual time of renewal. Please waive any late fees incurred. I spoke to your office who recommended for me to send a check in the amount of \$300.00. I have enclosed check # 1195 in the amount of \$300.00. Please allow this courtesy for this time since now I will be expecting a renewal form by the end of this year. Thank you for your attention to this matter.

Sincerely.

Dr. Felix Andarsio, Jr.