

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000092938

Entity Name: PHYSICIANS4U INC

FILED
Oct 07, 2009
Secretary of State

Current Principal Place of Business:

2332 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33020

New Principal Place of Business:

2704 S. PARK RD.
PEMBROKE PARK, FL 33009

Current Mailing Address:

2332 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33020

New Mailing Address:

2704 S. PARK RD.
PEMBROKE PARK, FL 33009

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NURIELI, EDDIE ESQ.
1835 E. HALLANDALE BEACH BLVD.
SUITE 117
HALLANDALE BEACH, FL 33009 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: EDDIE NURIELI

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: NURIELI, EDDIE
Address: 2332 HOLLYWOOD BLVD.
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NURIELI, EDDIE
Address: 2704 S. PARK RD.
City-St-Zip: PEMBROKE PARK, FL 33009

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: EDDIE NURIELI

DR

10/07/2009

Electronic Signature of Signing Officer or Director

Date