

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000095540

FILED
Nov 06, 2008
Secretary of State

Entity Name: FLAGLER DIAGNOSTIC & SLEEPING DISORDER, INC

Current Principal Place of Business:

4721 E.MOODY BLVD
SUITS 102,103,104
BUNNELL, FL 32110 US

New Principal Place of Business:

Current Mailing Address:

4721 E.MOODY BLVD, BLDG 1
104
BUNNELL, FL 32110 US

New Mailing Address:

FEI Number: 86-1109360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHEBERKO, OLEG
4721 E.MOODY BLVD
SUITE 102
BUNNELL,, FL 32110 US

Name and Address of New Registered Agent:

CHEBERKO, OLEG
4721 E.MOODY BLVD
SUITE 104
BUNNELL,, FL 32110 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: CHEBERKO, OLEG

11/06/2008

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: P () Delete
Name: CHEBERKO, OLEG
Address: 4721 E. MOODY BLVD
City-St-Zip: BUNNELL, FL 32110 US

Title: V () Delete
Name: KHAVULYA, ARKADIY
Address: 130 OCEANA DRIVE WEST, PH1
City-St-Zip: BROOKLYN, NY 11235

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CHEBERKO, OLEG
Address: 4721 E. MOODY BLVD SUITE 104
City-St-Zip: BUNNELL, FL 32110 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHEBERKO, OLEG

P

11/06/2008

Electronic Signature of Signing Officer or Director

Date