

# 2006 FOR PROFIT CORPORATION

DOCUMENT # P04000113772

1. Entity Name  
MID FLORIDA PROFESSIONAL GROUP, INC.



FILED

07 JAN -2 AM 8:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

3501 WEST VINE STREET  
SUITE 262  
KISSIMMEE, FL 34741 US

Mailing Address

3501 W VINE ST  
STE 262  
KISSIMMEE, FL 34741

2. Principal Place of Business

603 CAMEL LANE

3. Mailing Address

603 CAMEL LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

KISSIMMEE - FL

City & State

KISSIMMEE - FL

Zip

34759

Country

USA

Zip

34759

Country

USA

109520061 FRI JAN 11 2007

REINSTATEMENT

4. FEI Number

20-1497056

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

DAZA, JESSICA I  
603 CAMEL LANE  
KISSIMMEE, FL 34759

7. Name and Address of New Registered Agent

Name

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

*Jessica I Daza*

JESSICA I DAZA, PRESIDENT

11-30-06

Signature, typed or printed name of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After January 1, 2007, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE P  
NAME DAZA, JESSICA I  
STREET ADDRESS 603 CAMEL LANE  
CITY ST ZIP KISSIMMEE, FL 34759 ☐ Delete

TITLE VP  
NAME BEITIA, AMANDA E  
STREET ADDRESS 603 CAMEL LANE  
CITY ST ZIP KISSIMMEE, FL 34759 ☐ Delete

TITLE D  
NAME DAZA, MELISSA A  
STREET ADDRESS 603 CAMEL LANE  
CITY ST ZIP KISSIMMEE, FL 34759 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Change ☐ Addition  
800082862078  
12/23/06--01033--015 \*\*158.75

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Change ☐ Addition

TITLE  
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CITY ST ZIP ☐ Change ☐ Addition

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CITY ST ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Jessica I Daza*

JESSICA I DAZA

11-30-06

407-460-8306

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone

B. Mitchell JAN 2 2007