2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000142343

City-St-Zip:

TAMARAC, FL 33319

FILED Oct 04, 2007 Secretary of State

Date

Entity Name: DEBORAH A.L. PHILLIPS, P.A. **Current Principal Place of Business: New Principal Place of Business:** 4804 WEST COMMERCIAL BLVD. TAMARAC, FL 33319 **Current Mailing Address: New Mailing Address:** 4804 WEST COMMERCIAL BLVD. TAMARAC, FL 33319 FEI Number: 41-2160952 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: PHILLIPS, MICHAEL D PHILLIPS, MICHAEL D 4481 N. STATE ROAD 7 4475 N. STATE ROAD 7 LAUDERDALE LAKES, FL 33319 LAUDERDALE LAKES, FL 33319 US 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: MICHAEL PHILLIPS 10/04/2007 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: () Delete () Change () Addition PHILLIPS, DEBORAH A ESQ. Name: Name: 4804 WEST COMMERCIAL BLVD. Address: Address: City-St-Zip: TAMARAC, FL 33319 City-St-Zip: () Delete Title: VΡ Title: () Change () Addition PHILLIPS, DEBORAH Name: Name: 4804 WEST COMMERCIAL BLVD. Address: Address: TAMARAC, FL 33319 City-St-Zip: City-St-Zip: Title: SEC. Title: () Delete () Change () Addition PHILLIPS, DEBORAH Name: Name: 4804 WEST COMMERCIAL BLVD. Address: Address:

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.

City-St-Zip:

SIGNATURE: DEBORAH A.L. PHILLIPS PRES 10/04/2007