2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000004538

Entity Name: CARLOS R. DANGER, M.D., P.A.

FILED Oct 17, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

828 GRANADA GROVES COURT 4505 WEST FLAGLER STREET CORAL GABLES, FL 33134

201

MIAMI, FL 33134

Current Mailing Address: New Mailing Address:

828 GRANADA GROVES COURT 1318 EL RADO STREET CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

FEI Number: 20-2109704 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

DANGER, CARLOS DANGER, CARLOS 828 GRANADA GROVES COURT 1318 EL RADO STREET CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 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: CARLOS DANGER, MD 10/17/2006

> 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 (X) Change () Addition

DANGER, CARLOS R DANGER, CARLOS R Name: Name: 828 GRANADA GROVES COURT Address: 1318 EL RADO STREET Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

Title: (X) Delete Title: () Change () Addition

Name: DANGER, VANESSA A Name: 828 GRANADA GROVES COURT Address: Address: CORAL GABLES, FL 33134 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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.

Ρ SIGNATURE: CARLOS DANGER, MD 10/17/2006