2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 17, 2009
Secretary of State

DOCUMENT# P05000125955

Entity Name: SOUTH FLORIDA SURGERY AND BARIATRIC INSTITUTE P.A.

Current Principal Place of Business:

P. O. BOX 451050
MIAMI, FL 332451050

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 451050
MIAMI, FL 332451050

New Mailing Address:

FEI Number: 54-2182387 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCCORMICK, ARTHUR F
7550 SW 57TH AVE., SUITE 203
S. MIAMI, FL 33143 US

Name and Address of New Registered Agent:

VALLADARES, ERIC R
2660 SW 3 STREET
MIAMI, FL 33135 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: ERIC R. VALLADARES MD 10/17/2009
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: DR ( ) Delete
Name: VALLADARES, ERIC R
Address: P. O. BOX 451050
City-St-Zip: MIAMI, FL 332451050

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change ( ) Addition
Name: VALLADARES, ERIC R
Address: PO BOX 451050
City-St-Zip: MIAMI, FL 33245

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: ERIC R. VALLADARES MD DR 10/17/2009
Electronic Signature of Signing Officer or Director Date