

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000135647

**FILED**  
**Oct 19, 2009**  
**Secretary of State**

**Entity Name:** JAIME J. SILBERMAN, D.D.S., P.A.

**Current Principal Place of Business:**

4882 N CITATION DR SUITE 106  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

7593 BOYNTON BEACH BLVD  
180  
BOYNTON BEACH, FL 33437

**Current Mailing Address:**

4882 N CITATION DR SUITE 106  
DELRAY BEACH, FL 33445

**New Mailing Address:**

7593 BOYNTON BEACH BLVD  
180  
BOYNTON BEACH, FL 33437

FEI Number: 20-3582901

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

SILBERMAN, JAIME J PSTD  
7593 BOYNTON BEACH BLVD  
180  
BOYNTON BEACH, FL 33437 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: JAIME JOSEF SILBERMAN

10/19/2009

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: PSTD ( ) Delete  
Name: SILBERMAN, JAIME J  
Address: 4882 N CITATION DR SUITE 106  
City-St-Zip: DELRAY BEACH, FL 33445

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition  
Name: SILBERMAN, JAIME J  
Address: 7593 BOYNTON BEACH BLVD, SUITE 180  
City-St-Zip: BOYNTON BEACH, FL 33437

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: JAIME JOSEF SILBERMAN

PSTD

10/19/2009

Electronic Signature of Signing Officer or Director

Date