

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000136896

Entity Name: MAGALY SANCHEZ, P.A.

FILED
Feb 22, 2009
Secretary of State

Current Principal Place of Business:

15327 NW 60TH AVENUE
STE 230
MIAMI LAKES, FL 33014

New Principal Place of Business:

6261 LAKE PATRICIA DRIVE
MIAMI LAKES, FL 33014

Current Mailing Address:

15327 NW 60TH AVENUE
STE 230
MIAMI LAKES, FL 33014

New Mailing Address:

6261 LAKE PATRICIA DRIVE
MIAMI LAKES, FL 33014

FEI Number: 20-3717753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ, O J
7951 SW 40TH ST
STE 206
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

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: MS

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: SANCHEZ, MAGALY
Address: 15327 NW 60TH AVENUE, STE 230
City-St-Zip: MIAMI LAKES, FL 33014

Title: VP () Delete
Name: SANCHEZ, MAGALY
Address: 15327 NW 60TH AVENUE, STE 230
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: SANCHEZ, MAGALY
Address: 6261 LAKE PATRICIA DRIVE
City-St-Zip: MIAMI LAKES, FL 33014

Title: VP (X) Change () Addition
Name: SANCHEZ, MAGALY
Address: 6261 LAKE PATRICIA DRIVE
City-St-Zip: MIAMI LAKES, FL 33014

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: MS

Electronic Signature of Signing Officer or Director

PRES

02/22/2009

Date