

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000138781

FILED
Jan 06, 2009
Secretary of State

Entity Name: NAPLES INJURY CENTER #2, INC.

Current Principal Place of Business:

876 WEST SUGARLAND HWY
1-C
CLEWISTON, FL 33340

New Principal Place of Business:

4150 NW 7 ST
203
MIAMI, FL 33126

Current Mailing Address:

876 WEST SUGARLAND HWY
1-C
CLEWISTON, FL 33340

New Mailing Address:

4150 NW 7 ST
203
MIAMI, FL 33126

FEI Number: 20-3721887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIVALDO AROCHA DIEGAS
876 WEST SUGARLAND HWY
1-C
CLEWISTON, FL 33340 US

Name and Address of New Registered Agent:

LAZARO DELGADO
4150 NW 7 ST
203
MIAMI, FL 33126 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: LAZARO DELGADO

01/06/2009

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: PD () Delete
Name: NIVALDO AROCHA DIEGA, S
Address: 876 WEST SUGARLAND HWY, # 1-C
City-St-Zip: CLEWISTON, FL 33340

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NIVALDO AROCHA DIEGA, S
Address: 4150 NW 7 ST SUITE # 203
City-St-Zip: MIAMI, FL 33126

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: LAZARO DELGADO

PD

01/06/2009

Electronic Signature of Signing Officer or Director

Date