2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 22, 2009
Secretary of State

DOCUMENT# P05000168212

Entity Name: WILLIAM T. TRABULSI, D.P.M., P.A.

Current Principal Place of Business:

3909 GALEN COURT STE B1
SUN CITY CENTER, FL 33573

New Principal Place of Business:

19013 N. DALE MABRY HWY
LUTZ, FL 33548

Current Mailing Address:

3909 GALEN COURT STE B1
SUN CITY CENTER, FL 33573

New Mailing Address:

19013 N. DALE MABRY HWY
LUTZ, FL 33548

FEI Number: 20-4143073 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BELTRANO, ALDO ESQ
LAW OFFICES OF ALDO BELTRANO, P.A.
11911 US HWY 1 STE 201
NORTH PALM BEACH, FL 33409 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: ALDO BELTRANO

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: DPM ( ) Delete
Name: TRABULSI, WILLIAM T D.P.M
Address: 3909 GALEN COURT STE B1
City-St-Zip: SUN CITY CENTER, FL 33573

Title: STV ( ) Delete
Name: TRABULSI, WILLIAM T D.P.M
Address: 3909 GALEN COURT STE B1
City-St-Zip: SUN CITY CENTER, FL 33573

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPM (X) Change ( ) Addition
Name: TRABULSI, WILLIAM T D.P.M
Address: 19013 N. DALE MABRY HWY
City-St-Zip: LUTZ, FL 33548

Title: STV (X) Change ( ) Addition
Name: TRABULSI, WILLIAM T D.P.M
Address: 19013 N. DALE MABRY HWY
City-St-Zip: LUTZ, FL 33548

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: WILLIAM TRABULSI DPM 10/22/2009

Electronic Signature of Signing Officer or Director — Date