

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000051439

Entity Name: AHMAD B. AMAWI, P.A.

**FILED**  
**Oct 03, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2243 WESTBOURNE DR  
OVIEDO, FL 32765

**New Principal Place of Business:**

178 WILSHIRE BLVD  
CASSELBERRY, FL 32707

**Current Mailing Address:**

2243 WESTBOURNE DR  
OVIEDO, FL 32765

**New Mailing Address:**

178 WILSHIRE  
CASSELBERRY, FL 32707

FEI Number: 20-4676655

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PALMETTO CHARTER SERVICES, INC.  
150 MAGNOLIA AVE.  
DAYTONA BEACH, FL 321152491 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: AHMAD AMAWI M.D.

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DR  
Name: AMAWI, AHMAD B.  
Address: 2243 WESTBOURNE DR  
City-St-Zip: OVIEDO, FL 32765

I hereby 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 all other like empowered.

SIGNATURE: AHMAD AMAWI

CEO

10/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date