

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000065704

Entity Name: ANTOINE MELHEM P.A

FILED
Nov 10, 2008
Secretary of State

Current Principal Place of Business:

31 SE 5TH ST
CU 512
MIAMI, FL 33131

New Principal Place of Business:

2665 SW 37 AV
812
MIAMI, FL 33133

Current Mailing Address:

2665 SW 37 AV
812
MIAMI, FL 33133

New Mailing Address:

FEI Number: 20-4823293

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELHEM, ANTOINE
2665 SW 37 AV
812
MIAMI, FL 33133 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: ANTOINE MELHEM

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: MELHEM, ANTOINE
Address: 2665 SW 37 AVE. SUITE 812
City-St-Zip: MIAMI, FL 33133

Title: VPM () Delete
Name: ALDANA, ISABEL
Address: 2665 SW 37 AV APT 812
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANTOINE MELHEM

PSTD

11/10/2008

Electronic Signature of Signing Officer or Director

Date