

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000068084

FILED
Oct 25, 2007
Secretary of State

Entity Name: GORDON'S HEALTHCARE REGISTRY, INC.

Current Principal Place of Business:

7436 NW 34 STREET
LAUDERHILL, FL 33319

New Principal Place of Business:

Current Mailing Address:

9100 S. DADELAND BOULEVARD
SUITE 1607
MIAMI, FL 33156

New Mailing Address:

7436 NW 34 STREET
LAUDERHILL, FL 33319

FEI Number: 14-1962943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATTORNEY CORPORATE REPORTING SERVICES, INC
9100 S. DADELAND BOULEVARD
SUITE 1607
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

GORDON, MICHAEL S R.N.
7436 NW 34 STREET
LAUDERHILL, FL 33319 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: MICHAEL GORDON R.N.

10/25/2007

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: GORDON, MICHAEL S
Address: 7436 NW 34 STREET
City-St-Zip: LAUDERHILL, FL 33319

Title: VD () Delete
Name: GORDON, MARCIA E
Address: 7436 NW 34 STREET
City-St-Zip: LAUDERHILL, FL 33319

Title: T (X) Delete
Name: FISHER, OLIVE
Address: 7436 NW 34 STREET
City-St-Zip: LAUDERHILL, FL 33319

Title: S (X) Delete
Name: GORDON, MICHAEL O
Address: 7436 NW 34 STREET
City-St-Zip: LAUDERHILL, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MICHAEL GORDON R.N.

P

10/25/2007

Electronic Signature of Signing Officer or Director

Date