

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000120405

FILED  
Nov 21, 2008  
Secretary of State

Entity Name: AESTHOR E. BOMBINO, M.D.,P.A.

## Current Principal Place of Business:

330 SW 27TH AVE  
504  
MIAMI, FL 33135

## New Principal Place of Business:

10651 N KENDALL DRIVE  
201  
MIAMI, FL 33176

## Current Mailing Address:

330 SW 27TH AVE  
504  
MIAMI, FL 33135

## New Mailing Address:

10651 N KENDALL DRIVE  
201  
MIAMI, FL 33176

FEI Number: 20-5231054

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOMBINO, AESTHOR E MD  
7910 SW 73 CT  
MIAMI, FL 33143 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: AESTHOR E BOMBINO

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: P ( ) Delete  
Name: BOMBINO, AESTHOR E MD  
Address: 330 SW 27 AVE STE 504  
City-St-Zip: MIAMI, FL 33135 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BOMBINO, AESTHOR E MD  
Address: 10651 N KENDALL DRIVE STE 201  
City-St-Zip: MIAMI, FL 33176 US

Title: P ( ) Change (X) Addition  
Name: AESTHOR, BOMBINO M  
Address: 1435 WEST 49 PLACE STE 403  
City-St-Zip: HIALEAH, FL 33012

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: AESTHOR E BOMBINO

P

11/21/2008

Electronic Signature of Signing Officer or Director

Date