

2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000153992

FILED
Nov 16, 2010
Secretary of State

Entity Name: DANIEL J. BRAMS, P.A.

Current Principal Place of Business:

1645 PALM BEACH LAKES BOULEVARD
SUITE 1050
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

500 SOUTH AUSTRALIAN AVENUE
SUITE 800
WEST PALM BEACH, FL 33401 US

Current Mailing Address:

1645 PALM BEACH LAKES BOULEVARD
SUITE 1050
WEST PALM BEACH, FL 33401 US

New Mailing Address:

500 SOUTH AUSTRALIAN AVENUE
SUITE 800
WEST PALM BEACH, FL 33401 US

FEI Number: 20-8091115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAMS, DANIEL J ESQUIRE
1645 PALM BEACH LAKES BOULEVARD
SUITE 1050
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

BRAMS, DANIEL J ESQUIRE
500 SOUTH AUSTRALIAN AVENUE
SUITE 800
WEST PALM BEACH, FL 33401 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: DANIEL J. BRAMS

11/16/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: BRAMS, DANIEL J
Address: 500 SOUTH AUSTRALIAN AVENUE, STE. 800
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: VP
Name: BRAMS, DANIEL J
Address: 500 AUSTRALIAN AVENUE, STE. 800
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: S
Name: BRAMS, DANIEL J
Address: 500 SOUTH AUSTRALIAN AVENUE, STE. 800
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: T
Name: BRAMS, DANIEL J
Address: 500 SOUTH AUSTRALIAN AVENUE, STE. 800
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: D
Name: BRAMS, DANIEL J
Address: 500 SOUTH AUSTRALIAN AVENUE, STE. 800
City-St-Zip: WEST PALM BEACH, FL 33401 US

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: DANIEL J. BRAMS

PRES

11/16/2010

Electronic Signature of Signing Officer or Director

Date