

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000059108

**FILED**  
**Jun 19, 2011**  
**Secretary of State**

**Entity Name:** THE LAW OFFICES OF MIKE LISS P.A.

**Current Principal Place of Business:**

6991 NORTH STATE ROAD 7  
SECOND FLOOR  
PARKLAND, FL 33073

**New Principal Place of Business:**

NO PHYSICAL ADDRESS  
BOCA RATON, FL 33481

**Current Mailing Address:**

6991 NORTH STATE ROAD 7  
SECOND FLOOR  
PARKLAND, FL 33073

**New Mailing Address:**

P.O. BOX 812281  
BOCA RATON, FL 33481

**FEI Number:** 27-0529235

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LISS, MICHAEL J  
6991 NORTH STATE ROAD 7  
SECOND FLOOR  
PARKLAND, FL 33073 US

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

LISS, MICHAEL J  
NO PHYSICAL ADDRESS  
BOCA RATON, FL 33481 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 LISS

06/19/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LISS, MICHAEL J  
Address: P.O. BOX 812281  
City-St-Zip: BOCA RATON, FL 33481

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: MICHAEL LISS

PRES

06/19/2011

Electronic Signature of Signing Officer or Director

Date