

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P10000032537

**FILED**  
**Feb 15, 2013**  
**Secretary of State**

**Entity Name:** ROBIN KATZ P.A

**Current Principal Place of Business:**

1680 MERIDIAN AVE STE 101  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

1680 MERIDIAN AVE STE 101  
MIAMI BEACH, FL 33139

**New Mailing Address:**

**FEI Number:** 80-0595924

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KATZ, ROBIN  
1680 MERIDIAN AVE STE 101  
MIAMI BEACH, FL 33139 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:** ROBIN KATZ

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PVPT  
**Name:** KATZ, ROBIN  
**Address:** 1680 MERIDIAN AVE STE 101  
**City-St-Zip:** MIAMI BEACH, FL 33139

**Title:** S  
**Name:** KATZ, ROBIN  
**Address:** 1680 MERIDIAN AVE STE 101  
**City-St-Zip:** MIAMI BEACH, FL 33139

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:** ROBIN KATZ

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

**PRES**

**02/15/2013**

\_\_\_\_\_  
Date