2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 01, 2005
Secretary of State

DOCUMENT# P95000000043

Entity Name: DAVID SCHWARTZWALD, M.D., P.A.

Current Principal Place of Business:

9970 CENTRAL PARK BLVD. SO.
STE. 304
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

9970 CENTRAL PARK BLVD. SO.
STE. 304
BOCA RATON, FL 33428

New Mailing Address:

4481 WOODFIELD BLVD
BOCA RATON, FL 33434

FEI Number: 65-0542527 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHWARTZWALD, DAVID M.D.
9970 CENTRAL PARK BLVD. SO.
STE. 304
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

SCHWARTZWALD, DAVID M.D.
4481 WOODFIELD BLVD
BOCA RATON, FL 33434 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: DAVID SCHWARTZWALD 12/01/2005
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: PSTD ( ) Delete
Name: SCHWARTZWALD, DAVID M.D.
Address: 9970 CENTRAL PARK BLVD SO #304
City-St-Zip: BOCA RATON, FL 33428

Title: S ( ) Delete
Name: SCHWARTZWALD, RAND
Address: 9970 CENTRAL PK BLVD #304
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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: DAVID SCHWARTZWALD P 12/01/2005
Electronic Signature of Signing Officer or Director Date