FROM: LUSKY & MOTOPA.

PHONE NO. : 305 446 1205

Oct. 31/2600 40:30AM P2 SECRETARY OF OR ATIONS

(H00000056596 0)

PLEASE READ	ÁLL INSTRUCTIONS BEFORE (COMPLETING THIS FORM.
CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	00 OCT 3 1 AM 10: 47
DOCUMENT # P97000	071022	·
PACIFIC MEB	TLAL GROUP, INC.	O4
2. Principal Office Address	3. Mailing Office Address	<i>[]</i> ()
9664 COPAL WAY	9664 CORAL WAY	REINSTATEMENT
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	To Do Business in Florida 8/15/1997
MIAMI, FL	MIAMI, FL	S. FEI Number 650777978 Applied For Not Applicable
33165 Country USA	33165 Country USA	CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required to a Certificate of Status
	7. Name and Address of Current Register	
Name JI/Au	I COUTO	
Street Address (P.O. Box Number is N		
Surte, Apt. #, Etc.	EURAL WAY	
GINY MIAMI		FL 33165
8. I, being appointed the registered agent of the about	re named corporation, am familiar with and accept the ob	
Signature of Registered Agent A	OISTERED AGENT MUST SIGN	Date 10-31-00
9. Names and Street Addresses of Each Officer and	or Director (Florida nonprofit corporations must list at lea	si 3 directors)
Titles Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PB JUAN COUTO	9664 COPAL WAY	MIAMI, FL 33165
,		
	•	
		Alb
		. AD
this reinstatement application, the reason for disse owed by the corporation have been paid and the r	station has been eliminated, the comorate name satisfies t	ovided for in chapter 607 or 617, F.S. I turther certify that when tiling the requirements of section 607,0401 or 617,0401, F.S., that all fees a comption under section 119,07(3)(i), F.S. The information indicated oath.
SIGNATURE: SIGNATURE AND TYPED OR PRO	NTED NAME OF SIGNING OFFICER OR DIRECTOR	10-31-00 305- 225-7766 Date Osyttme Phone #

FROM: LUSKY & MOTOPA.

Division of Corporations

PHONE NO. : 305 446 1205

Oct. 31 2000 10:30AM P1

Page 1 of 2

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 922-4004

From:

Account Name : LUSKY & MOTOLA, ESQ.

Account Number : 110331002052 Phone : (305)446-1245 Fax Number : (305)446-1205

CORPORATION REINSTATEMENT

PACIFIC MEDICAL GROUP, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$750.00