2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 21, 2006
Secretary of State

DOCUMENT# P97000084124

Entity Name: SOUTH FLORIDA INSTITUTE OF MEDICINE, INC.

Current Principal Place of Business:

12033 SW 117TH AVE
MIAMI, FL 33196 US

New Principal Place of Business:

Current Mailing Address:

12033 SW 117TH AVE
MIAMI, FL 33196 US

New Mailing Address:

FEI Number: 65-0786906 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RODRIQUEZ, ROBERT F
3291 SW 25TH ST
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

RODRIQUEZ, ROBERT F
PO BOX 160788
MIAMI, FL 33116 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: ROBERT RODRIGUEZ 09/21/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: RODRIGUEZ, ROBERT F
Address: 3291 SW 25TH STREET
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition
Name: RODRIGUEZ, ROBERT F
Address: PO BOX 160788
City-St-Zip: MIAMI, FL 33116

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ROBERT RODRIGUEZ PD 09/21/2006
Electronic Signature of Signing Officer or Director Date