2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000096851

Entity Name: MARIO ALMEIDA, M.D. P.A.

FILED Sep 27, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1150 CAMPO SANO AVE. 1150 CAMPO SANO AVENUE 401 SUITE 401

CORAL GABLES, FL 33146 CORAL GABLES, FL 33146

Current Mailing Address: New Mailing Address:

9001 S.W. 64TH COURT 1150 CAMPO SANO AVENUE MIAMI, FL 33156 SUITE 401

CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: 65-0310039 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ALMEIDA, MARIO M.D.

9001 S.W. 64TH COURT

MIAMI, FL 33156 US

ALMEIDA, MARIO A M.D.

1150 CAMPO SANO AVENUE

SUITE 401

CORAL GABLES, FL 33146 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: MARIO A. ALMEIDA 09/27/2007

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:

PD () Delete Title: PD (X) Change () Addition

 Name:
 ALMEIDA, MARIO M.D.
 Name:
 ALMEIDA, MARIO A M.D.

 Address:
 9001 S.W. 64TH COURT
 Address:
 1150 CAMPO SANO AVENUE, SUITE 401

 City-St-Zip:
 MIAMI, FL 33156
 City-St-Zip:
 CORAL GABLES, FL 33146

Title: VPD () Delete Title: VPD (X) Change () Addition Name: ALMEIDA, CIRA M Name: ALMEIDA, CIRA M

Address: 9001 SW 64TH CT Address: 1150 CAMPO SANO AVENUE, SUITE 401

City-St-Zip: MIAMI, FL 33156 City-St-Zip: CORAL GABLES, FL 33146

I hereby certify that the information supplied with this filing does not qualify 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: MARIO A. ALMEIDA P 09/27/2007