

**2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P98000072131

**FILED  
Jan 13, 2011  
Secretary of State**

**Entity Name:** ESCOTO AND MANTOVANI, D.D.S., P.A.

**Current Principal Place of Business:**

2895 COLLINS AVENUE  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

**Current Mailing Address:**

2895 COLLINS AVENUE  
MIAMI BEACH, FL 33140

**New Mailing Address:**

**FEI Number:** 65-0663766      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ESCOTO, MARIA  
2895 COLLINS AVENUE  
MIAMI BEACH, FL 33140      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: MARIA ESCOTO

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ESCOTO, MARIA  
Address: 2895 COLLINS AVE  
City-St-Zip: MIAMI BEACH, FL 33140

Title: VP  
Name: MANTOVANI, ALBERTO  
Address: 2895 COLLINS AVE  
City-St-Zip: MIAMI BEACH, FL 33140

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: MARIA ESCOTO

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

PD

01/13/2011

\_\_\_\_\_  
Date