

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000078817

FILED
Oct 08, 2009
Secretary of State

Entity Name: JARQUIN & ASSOCIATES, P.A.

Current Principal Place of Business:

8410 W. FLAGLER STREET
SUITE 110-B
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

8410 W. FLAGLER STREET
SUITE 110-B
MIAMI, FL 33144

New Mailing Address:

FEI Number: 65-0862445 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JARQUIN, ALVARO DDS
8410 WEST FLAGLER STREET
SUITE 110-B
MIAMI, FL 33144 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: ALVARO JARQUIN

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
Name: JARQUIN, ALVARO
Address: 8410 W. FLAGLER STREET, SUITE 110-B
City-St-Zip: MIAMI, FL 33144

Title: SD () Delete
Name: JARQUIN, ALBERTO
Address: 13941 SW 11TH STREET
City-St-Zip: MIAMI, FL 33184

Title: TD () Delete
Name: JARQUIN, YOLANDA
Address: 13941 SW 11TH STREET
City-St-Zip: MIAMI, FL 33184

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DDS (X) Change () Addition
Name: JARQUIN, ALVARO
Address: 8410 W. FLAGLER STREET, SUITE 110-B
City-St-Zip: MIAMI, FL 33144

Title: TD (X) Change () Addition
Name: JARQUIN, ALBERTO
Address: 13941 SW 11TH STREET
City-St-Zip: MIAMI, FL 33184

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ALVARO JARQUIN

Electronic Signature of Signing Officer or Director

PRES

10/08/2009

Date