2011 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 05, 2011
Secretary of State

DOCUMENT# P98000087206

Entity Name: BRAD E. OREN, M.D., P.A.

Current Principal Place of Business:

4915 SOUTH CONGRESS AVENUE
SUITE C
LAKE WORTH, FL 33461 US

New Principal Place of Business:

Current Mailing Address:

4915 SOUTH CONGRESS AVENUE
SUITE C
LAKE WORTH, FL 33461 US

New Mailing Address:

FEI Number: 65-0868500 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OREN, BRAD E MD
4915 SOUTH CONGRESS AVENUE
SUITE C
LAKE WORTH, FL 33461 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: BRAD E OREN MD
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DR.
Name: OREN, BRAD E M.D.
Address: 4915 SOUTH CONGRESS AVENUE STE C
City-St-Zip: LAKE WORTH, FL 33461

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: BRAD E OREN MD PRES 10/05/2011
Electronic Signature of Signing Officer or Director Date