

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P98000099698

**FILED**  
**Dec 20, 2011**  
**Secretary of State**

**Entity Name:** NORMAN L. HERSKOVICH, O.D. & ASSOCIATES, INC.

**Current Principal Place of Business:**

5200 NORTH FEDERAL HIGHWAY  
SUITE 4  
FT. LAUDERDALE, FL 33308 US

**New Principal Place of Business:**

**Current Mailing Address:**

166 RIVERWALK CIRCLE  
SUNRISE, FL 33326 US

**New Mailing Address:**

**FEI Number:** 65-0880190

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BUSINESS FILINGS INCORPORATED  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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:** NORMAN LEE HERSKOVICH

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** HERSKOVICH, NORMAN LEE  
**Address:** 5200 NORTH FEDERAL HIGHWAY - SUITE 4  
**City-St-Zip:** FT. LAUDERDALE, FL 33308 US

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:** NORMAN LEE HERSKOVICH

P

12/20/2011

Electronic Signature of Signing Officer or Director

Date