

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000032351

FILED
Sep 28, 2007
Secretary of State

Entity Name: ADVANCED ALLERGY & ASTHMA CARE PA

Current Principal Place of Business:

6233 66TH STREET NORTH
PINELLAS PARK, FL 33781

New Principal Place of Business:

Current Mailing Address:

6233 66TH STREET NORTH
PINELLAS PARK, FL 33781

New Mailing Address:

4310 ALDON COURT
PALM HARBOR, FL 34685

FEI Number: 22-3647644

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHAMARTHY, LATHA
4310 ALDON COURT
PALM HARBOR, FL 34685 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: LATHA CHAMARTHY

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: D () Delete
Name: CHAMARTHY, LATHA M
Address: 4310 ALDON COURT
City-St-Zip: PALM HARBOR, FL 34685

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LATHA CHAMARTHY

D

09/28/2007

Electronic Signature of Signing Officer or Director

Date