

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000042167

Entity Name: MED-STAT, INC.

FILED
Jun 30, 2006
Secretary of State

Current Principal Place of Business:

6670 NW 27 AVENUE
#408
BOCA RATON, FL 334962023

New Principal Place of Business:

6670 NW 27 AVENUE
BOCA RATON, FL 334962023

Current Mailing Address:

6670 NW 27 AVENUE
#408
BOCA RATON, FL 334962023

New Mailing Address:

6670 NW 27 AVENUE
BOCA RATON, FL 334962023

FEI Number: 65-0921189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HYMOFF, DONNA
6670 NE 27 AVENUE
BOCA RATON, FL 334962023 US

Name and Address of New Registered Agent:

HYMOFF, DONNA
6670 NW 27 AVENUE
BOCA RATON, FL 334962023 US

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: DONNA HYMOFF

06/30/2006

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: HYMOFF, DONNA
Address: 6670 NW 27 AVENUE
City-St-Zip: BOCA RATON, FL 334962023

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 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: DONNA HYMOFF

PD

06/30/2006

Electronic Signature of Signing Officer or Director

Date