

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# S72340

Entity Name: KAREN D. FAULKNER, P.A.

FILED
Oct 05, 2005
Secretary of State

Current Principal Place of Business:

2021 E. COMMERCIAL BLVD
STE 207
FT LAUDERDALE, FL 33308 US

New Principal Place of Business:

Current Mailing Address:

2021 E. COMMERCIAL BLVD
STE 207
FT LAUDERDALE, FL 33308 US

New Mailing Address:

FEI Number: 65-0289174 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAULKNER, KAREN D
2021 EAST CONNERCIAL BLVD.
FT LAUDERDALE, FL 33306 US

Name and Address of New Registered Agent:

FAULKNER, KAREN D
2021 EAST CONNERCIAL BLVD.
STE 207
FT LAUDERDALE, FL 33308 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: KAREN D. FAULKNER

10/05/2005

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: FAULKNER, KAREN D,
Address: 2021 EAST COMMERCIAL BLVD, STE. 207
City-St-Zip: FT LAUDERDALE, FL 33308

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 Section 119.07(3)(i), 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: KAREN D. FAULKNER

D

10/05/2005

Electronic Signature of Signing Officer or Director

Date