

# 2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P10000018984

**FILED**  
**Dec 07, 2011**  
**Secretary of State**

**Entity Name:** FIRST CHOICE HEALTH GROUP INC.

**Current Principal Place of Business:**

1515 SOUTH FEDERAL HIGHWAY  
SUITE 208  
BOCA RATON, FL 33432

**New Principal Place of Business:**

700 OCEAN AVE  
UNIT 7  
LONG BRANCH, NJ 07740

**Current Mailing Address:**

1515 SOUTH FEDERAL HIGHWAY  
SUITE 208  
BOCA RATON, FL 33432

**New Mailing Address:**

700 OCEAN AVE  
UNIT 7  
LONG BRANCH, NJ 07740

**FEI Number:** 27-2045453

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: ISAAC COHEN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PSDT  
Name: COHEN, ISAAC  
Address: 700 OCEAN AVE - UNIT 6  
City-St-Zip: LONG BRANCH, NJ 07740

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: ISAAC COHEN

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PSDT

12/07/2011

\_\_\_\_\_  
Date