

**2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
May 04, 2005  
Secretary of State**

DOCUMENT# N02000008343

Entity Name: YOUTH UNITED OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

7825 VENETIAN STREET  
MIRAMAR, FL 33023

**New Principal Place of Business:**

**Current Mailing Address:**

7825 VENETIAN STREET  
MIRAMAR, FL 33023

**New Mailing Address:**

FEI Number: 54-2083799      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

EUGENE, MATHILDE G.  
7825 VENETIAN STREET  
MIRAMAR, FL 33023      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: MATHILDE G. EUGENE

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: EUGENE, MATHILDE G  
Address: 7825 VENETIAN STREET  
City-St-Zip: MIRAMAR, FL 33023

Title: 1VPD      ( ) Delete  
Name: NASSAR, MICHELE  
Address: 6235 NW MIAMI PLACE  
City-St-Zip: MIAMI, FL 33150

Title: 2VPD      ( ) Delete  
Name: BITAR-FREDERICK, PATRICK  
Address: 915 NE 125TH STREET  
City-St-Zip: NORTH MIAMI, FL 33161

Title: TD      ( ) Delete  
Name: JEROME, ERIC PIERRE  
Address: 151 SW 134TH WAY, APT. #303N  
City-St-Zip: PEMBROKE PINES, FL 33027

Title: TD      ( ) Delete  
Name: JEANNOT, GISLAINE  
Address: 2631 FLAMINGO DRIVE  
City-St-Zip: MIRAMAR, FL 33023

Title: SD      ( ) Delete  
Name: MIRTIL, GEORGE  
Address: 1100 NE 184TH STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33161

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATHILDE G. EUGENE

PD

05/04/2005

Electronic Signature of Signing Officer or Director

Date