

**2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 04, 2007  
Secretary of State**

DOCUMENT# N05000005642

Entity Name: SERVING HEARTS ABROAD, INC.

**Current Principal Place of Business:**

4846 N. UNIVERSITY DRIVE  
#352  
LAUDERHILL, FL 33351

**New Principal Place of Business:**

**Current Mailing Address:**

4846 N. UNIVERSITY DRIVE  
#352  
LAUDERHILL, FL 33351

**New Mailing Address:**

FEI Number: 20-2932667      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

BENJAMIN, MARIE-LINE  
491 NW 42ND AVE.  
#56  
PLANTATION, FL 33317 US

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

BENJAMIN, MARIE-LINE  
1788 SW 81ST LANE  
DAVIE, FL 33324 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: MARIE-LINE BENJAMIN

10/04/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BENJAMIN, MARIE-LINE  
Address: 4846 N. UNIVERSITY DRIVE # 352  
City-St-Zip: LAUDERHILL, FL 33351

Title: VP ( ) Delete  
Name: BENJAMIN, VALESKA L  
Address: 4846 N. UNIVERSITY DRIVE #352  
City-St-Zip: LAUDERHILL, FL 33351

Title: SEC ( ) Delete  
Name: JN. FRANCOIS, FRANCES  
Address: 4846 N. UNIVERSITY DRIVE #352  
City-St-Zip: LAUDERHILL, FL 33351

Title: TRES ( ) Delete  
Name: BENJAMIN, MARIE-LINE  
Address: 4846 N. UNIVERSITY DRIVE #352  
City-St-Zip: LAUDERHILL, FL 33351

**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:

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

SIGNATURE: MARIE-LINE BENJAMIN

P

10/04/2007

Electronic Signature of Signing Officer or Director

Date