## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N05000005948

Entity Name: RADIANT HANDS INC.

FILED Jan 05, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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7924 SW 51ST. BLVD 3504 SW 1ST WAY

GAINESVILLE, FL 32608 US GAINESVILLE, FL 32601 US

Current Mailing Address: New Mailing Address:

7924 SW 51ST. BLVD PO BOX 140661

GAINESVILLE, FL 32608 US GAINESVILLE, FL 32614 US

FEI Number: 20-2966567 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.

US

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

KHAN, AMEENA MS. 4411 SW 34TH ST #1103 GAINESVILLE, FL 32608

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: AMEENA KHAN

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P ( ) Delete Title: PRES (X) Change ( ) Addition

 Name:
 KHAN, AMEENA MS.
 Name:
 KHAN, AMEENA DR.

 Address:
 4411 SW 34TH ST #1103
 Address:
 4411 SW 34TH ST #1103

 City-St-Zip:
 GAINESVILLE, FL 32608 US
 City-St-Zip:
 GAINESVILLE, FL 32608 US

Title: SEC ( ) Delete Title: ( ) Change ( ) Addition Name: HASSANEIN, AMANY S MRS. Name:

Address: 1089 HARMONY LANE Address: City-St-Zip: CLERMONT, FL 34711 US City-St-Zip:

Name:KHAN, PATRICIA MRS.Name:KHAN, PATRICIA MRS.Address:3504 SW 1ST WAYAddress:3504 SW 1ST WAY

City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: GAINESVILLE, FL 32601 US

Title: D ( ) Delete Title: D (X) Change ( ) Addition
Name: AKINYODE, ADENIKE M Name: AKINYODE, ADENIKE M

 Name:
 ARINYODE, ADENIRE M

 Address:
 P. O. BOX 830171

 City-St-Zip:
 OCALA, FL 36683

 City-St-Zip:
 OCALA, FL 36683 US

Title: ( ) Delete Title: D ( ) Change (X) Addition

 Name:
 Name:
 RITCH, JEAN

 Address:
 Address:
 605 QUEENS ROAD

 City-St-Zip:
 City-St-Zip:
 GAINESVILLE, FL 32608 US

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: PATRICIA J KHAN T 01/05/2009