2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 08, 2005
Secretary of State

DOCUMENT# P94000069545

Entity Name: HANDS ON LEARNING CORP.

Current Principal Place of Business:

4360 SABAL PALM RD
MIAMI, FL 33137 US

New Principal Place of Business:

Current Mailing Address:

4360 SABAL PALM RD
MIAMI, FL 33137 US

New Mailing Address:

FEI Number: 65-0543280 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ARBULU, MARTA S
4360 SABAL PALM RD
MIAMI, FL 33137 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: MARTA S. ARBULU

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: PSD ( ) Delete
Name: ARBULU, MARTA
Address: 4360 SABAL PALM RD
City-St-Zip: MIAMI, FL 33137

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP ( ) Change (X) Addition
Name: ARBULU, ANTONIO
Address: 4360 SABAL PALM ROAD
City-St-Zip: MIAMI, FL 33137

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: MARTA S. ARBULU PSD 10/08/2005

Electronic Signature of Signing Officer or Director Date