

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Dec 15, 2005
Secretary of State

DOCUMENT# N04000003092

Entity Name: SOUTH FLORIDA LEADERSHIP SEMINAR, INC.

Current Principal Place of Business:

811 ALGERIA AVENUE
CORAL GABLES, FL 33134

New Principal Place of Business:

700 NE 63 ST
D-406
MIAMI, FL 33138

Current Mailing Address:

811 ALGERIA AVENUE
CORAL GABLES, FL 33134

New Mailing Address:

700 NE 63 ST
D-406
MIAMI, FL 33138

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

SOUTH FLORIDA HOBY
811 ALGERIA AVE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

SOUTH FLORIDA HOBY
700 NE 63 ST
D-406
MIAMI, FL 33138 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: SOUTH FLORIDA HOBY (ALEXANDER DIAZ)
Electronic Signature of Registered Agent

12/15/2005
Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DIAZ, ALEXANDER
Address: 1257 SW 15 ST SUITE 205
City-St-Zip: MIAMI, FL 33145

Title: S () Delete
Name: MC DONOUGH, JOHN
Address: 2020 CONFRENCE DRIVE
City-St-Zip: BOCA RATON, FL 33486

Title: M () Delete
Name: PHILLIPS, LON
Address: 2847 NW 34 ST
City-St-Zip: BOCA RATON, FL 33434

Title: M () Delete
Name: JACKSON, STEPHANIE
Address: 47 F SE 11 ST
City-St-Zip: DANIA BEACH, FL 33004

Title: M () Delete
Name: TOZZER, HAL
Address: 811 ALGERIA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: M () Delete
Name: MONROIG, ISHMALE
Address: 3265 NW 87TH AVE.
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DIAZ, ALEXANDER
Address: 700 NE 63 ST D-406
City-St-Zip: MIAMI, FL 33138

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: ALEXANDER DIAZ
Electronic Signature of Signing Officer or Director

P
12/15/2005
Date