

# 2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N10000008106

FILED  
Jan 24, 2012  
Secretary of State

**Entity Name:** DREAMS YOU MAY ACHIEVE FOUNDATION, INC.

**Current Principal Place of Business:**

2759 NW 59 ST.  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

1001 N. FEDERAL HWY.  
STE. 359  
HALLANDALE, FL 33009

**New Mailing Address:**

1001 N. FEDERAL HWY.  
STE# 361  
HALLANDALE, FL 33009

FEI Number: 27-3226991

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LINDER, TANGELA C  
1001 N. FEDERAL HWY  
STE 359  
HALLANDALE, FL 33009 US

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

JONES, TANGELA C  
1001 N. FEDERAL HWY  
STE# 361  
HALLANDALE, FL 33009 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: TANGELA JONES

01/24/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: JONES, TANGELA C  
Address: 1001 N FEDERAL HIGHWAY, STE#361  
City-St-Zip: HALLANDALE, FL 33009

Title: D  
Name: FARMER, KENYA  
Address: 830 NE 172 TERRACE  
City-St-Zip: NORTH MIAMI BCH, FL 33162

Title: SD  
Name: WILLIAMS-ROULHAC, NICOLE  
Address: 329 SW 120TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D  
Name: JONES, TOREY L  
Address: 1001 N FEDERAL HWY, STE#359  
City-St-Zip: HALLANDALE, FL 33009

Title: D  
Name: DOUGLAS, NAOMI Y  
Address: 1290 NW 52 STREET  
City-St-Zip: MIAMI, FL 33142

Title: D  
Name: PENN, NAJEE  
Address: 1290 NW 161 AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

I hereby 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 all other like empowered.

SIGNATURE: TANGELA C JONES

PD

01/24/2012

Electronic Signature of Signing Officer or Director

Date