

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 714513

FILED
Mar 22, 2007
Secretary of State

Entity Name: HARMONY VILLA INC.

Current Principal Place of Business:

724, 728, 732, 736 LENOX AVE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

C/O ERNIE AGUILA
724 LENOX AVE., #3
MIAMI BEACH, FL 33139

New Mailing Address:

C/O BONAFIDE MANAGEMENT GROUP, INC.
P.O. BOX 521458
MIAMI, FL 33152

FEI Number: 59-2042169 FEI Number Applied For () FEI Number Not Applicable () 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:

RUSSI, RICARDO
C/O BONAFIDE MGMT
3100 NW 72 AV, #125
MIAMI, FL 33122 US

Name and Address of New Registered Agent:

RUSSI, RICARDO
C/O BONAFIDE MGMT
3100 NW 72 AV, #127
MIAMI, FL 33122 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: RICARDO RUSSI

03/22/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: AGUILA, ERNIE
Address: 724 LENOX AVE., #3
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: SD () Delete
Name: GEERLING, MARJETTA
Address: 728 LENOX AVE #5
City-St-Zip: MIAMI BEACH, FL 33139

Title: VD (X) Delete
Name: LOCSIN, MARIO
Address: 732 LENOX AVE #3
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD () Delete
Name: QUINCY, SUZANNE
Address: 732 LENOX AVE #4
City-St-Zip: MIAMI BEACH, FL 33139

Title: PD (X) Delete
Name: WELLS-ROTH, LINDA
Address: 728 LENOX AVE., #6
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CRUMPTON, MICHAEL
Address: 728 LENOX AVE #5
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD (X) Change () Addition
Name: HERNANDEZ, MINERVA
Address: 2750 WEST TRADE AVE, #B
City-St-Zip: MIAMI BEACH, FL 33133

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 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: RICARDO RUSSI

MGR

03/22/2007

Electronic Signature of Signing Officer or Director

Date