2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 31, 2008
Secretary of State

DOCUMENT# F02000004700

Entity Name: PREMIER HEALTHCARE PROFESSIONALS, INC.

Current Principal Place of Business:

2450 ATLANTA HWY
601
CUMMING, GA 30040

New Principal Place of Business:

Current Mailing Address:

2450 ATLANTA HWY
601
CUMMING, GA 30040

New Mailing Address:

FEI Number: 13-4209978 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORAN, SHELLIE
1424 MONTE LAKE DRIVE
VALRICO, FL 33594 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: S MORAN

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: CEO ( ) Delete
Name: EALES, CHRISTOPHER
Address: 2450 ATLANTA HWY
City-St-Zip: CUMMING, GA 30040

Title: CEOS ( ) Delete
Name: EALES, CHRISTOPHER
Address: 2450 ATLANTA HWY
City-St-Zip: CUMMING, GA 30040

Title: CEO ( ) Delete
Name: EALES, CHRISTOPHER
Address: 2450 ATLANTA HWY
City-St-Zip: CUMMING, GA 30040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CEO (X) Change ( ) Addition
Name: EALES, CHRISTOPHER
Address: 2450 ATLANTA HWY
City-St-Zip: CUMMING, GA 30040

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: C EALES CEO 10/31/2008

Electronic Signature of Signing Officer or Director Date