

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000003589

Entity Name: BFD OF SOUTH FLORIDA, INC.

FILED
Jul 08, 2005
Secretary of State

Current Principal Place of Business:

C/O MELVYN HODIS
399 ROUTE 211
MIDDLETOWN, NY 10940

Current Mailing Address:

C/O MELVYN HODIS
399 ROUTE 211
MIDDLETOWN, NY 10940

New Principal Place of Business:

C/O MELVYN HODIS
7904 VILLA D'ESTE WAY
DELRAY BEACH, FL 33446 US

New Mailing Address:

C/O MELVYN HODIS
7904 VILLA D'ESTE WAT
DELRAY BEACH, FL 33446 US

FEI Number: 06-1625047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HODIS, MELVYN
7904 VILLA D'ESTE WAY
DELRAY BEACH, FL 33446 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: MELVYN HODIS

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: PVST () Delete
Name: HODIS, MELVYN
Address: 399 RT. 211
City-St-Zip: MIDDLETOWN, NY 10940

Title: CD () Delete
Name: HODIS, MELVYN
Address: 399 RT. 211
City-St-Zip: MIDDLETOWN, NY 10940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: HODIS, MELVYN
Address: 7904 VILLA D'ESTE WAY
City-St-Zip: DELRAY BEACH, FL 33446 US

Title: VS (X) Change () Addition
Name: HODIS, DOUGLAS
Address: 7904 VILLA D'ESTE WAY
City-St-Zip: DELRAY BEACH, FL 33446 US

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: MELVYN HODIS

Electronic Signature of Signing Officer or Director

PRES

07/08/2005

Date