

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# G07577

FILED  
Dec 09, 2008  
Secretary of State

Entity Name: MARANATHA HOME CARE, INC.

## Current Principal Place of Business:

865 91ST AVE NO  
NAPLES, FL 34108 US

## New Principal Place of Business:

5440 PARK CENTRAL COURT  
SUITE # 2  
NAPLES, FL 34109 US

## Current Mailing Address:

865 91ST AVE NO  
NAPLES, FL 34108 US

## New Mailing Address:

360 HAMILTON AVENUE  
SUITE 120  
WHITE PLAINS, NY 10601 US

FEI Number: 59-2329885

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHWABE, ARTHUR  
865 91ST AVE NO  
NAPLES, FL 34108 US

## Name and Address of New Registered Agent:

SCHWABE, ARTHUR  
5440 PARK CENTRAL COURT  
SUITE 2  
NAPLES, FL 34109 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: ARTHUR SCHWABE

12/09/2008

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: PD ( ) Delete  
Name: SCHWABE, ARTHUR  
Address: 360 HAMILTON AVENUE  
City-St-Zip: WHITE PLAINS, NY 10601

Title: ST ( ) Delete  
Name: SCHWABE, PAUL  
Address: 360 HAMILTON AVENUE  
City-St-Zip: WHITE PLAINS, NY 10601

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ARTHUR SCHWABE

CEO

12/09/2008

Electronic Signature of Signing Officer or Director

Date