## 2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N0000001408

Entity Name: S.I.S.T.U.H.S., INC.

FILED Oct 21, 2004 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
| RM. 303M                             | P.O. BOX 540942                  |

OGLESBY UNION TALLAHASSEE, FL 323064026

TALLAHASSEE, FL 323004020

Current Mailing Address: New Mailing Address:

RM. 303M P.O BOX 540942 OGLESBY UNION PA-LOCKA, FL 33054

TALLAHASSEE, FL 323064026

FEI Number: 59-3635003 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

OPA-LOCKA, FL 33054

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: Name and Address of New Registered Agent:

THOMPSON, MARCHELEY
810 WADSWORTH STREET
208B
TALLAHASSEE, FL 32304 US
THOMPSON, MARCHELEY
13241 NW 23 AVE
MIAMI, FL 33167 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: MARCHELEY THOMPSON 10/21/2004

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T ( ) Delete Title: D (X) Change ( ) Addition Name: ALEXANDER, SHIRLINE Name: KNIGHT, NOVIA

 Name:
 ALEXANDER, SHIRLINE
 Name:
 NNIGHT, NOVIA

 Address:
 836 RICHMOND STREET, #6
 Address:
 P.O. BOX 540942

 City-St-Zip:
 TALLAHASSEE, FL 32304
 City-St-Zip:
 OPA-LOCKA, FL 33054

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad ({\sf X}) \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad (\ ) \ {\sf Change} \ (\ ) \ {\sf Addition}$ 

 Name:
 TRACY, KEISHA
 Name:

 Address:
 982 WEST BREVARD STREET
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32304
 City-St-Zip:

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: THOMPSON, MARCHELEY Name: THOMPSON, MARCHELEY

 Address:
 810 WADSWORTH STREET, #208B
 Address:
 13241 NW 23 AVE

 City-St-Zip:
 TALLAHASSEE, FL 32304
 City-St-Zip:
 MIAMI, FL 33167

Title: D () Delete Title: D (X) Change () Addition

Name:PRINCE, CICILIAName:PRINCE, CICILIAAddress:911 RICHMOND STREET GAddress:11007 WINGATE DRIVECity-St-Zip:TALLAHASSEE, FL 32304City-St-Zip:TAMPA, FL 33624

 Name:
 LORA, WALDA
 Name:
 LORA, WALDA

 Address:
 2803 WOODRIDGE DRIVE #D
 Address:
 P.O BOX 540942

 City-St-Zip:
 TALLAHASSEE, FL 32301
 City-St-Zip:
 OPA-LOCKA, FL 33054

Title: ( ) Delete Title: D ( ) Change (X) Addition

 Name:
 Name:
 WRIGHT, DEBRA

 Address:
 Address:
 P.O BOX 540942

 City-St-Zip:
 City-St-Zip:
 OPA-LOCKA, FL 33054

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

SIGNATURE: MARCHELEY THOMPSON D 10/21/2004