

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 07, 2007
Secretary of State**

DOCUMENT# N01000005165

Entity Name: DESTINY SCHOOL OF ETIQUETTE & PAGEANTRY, INC.

Current Principal Place of Business:

1265 NW 91 STREET
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

1265 NW 91 STREET
MIAMI, FL 33147

New Mailing Address:

FEI Number: 65-1123843 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BASS, CONSTANCE P
1265 NW 91 STREET
MIAMI, FL 33147 US

Name and Address of New Registered Agent:

ROBINSON, CONSTANCE B
1265 NW 91 STREET
MIAMI, FL 33147 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: CONSTANCE B. ROBINSON 10/07/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROBINSON, CONSTANCE B
Address: 1265 NW 91 STRRET
City-St-Zip: MIAMI, FL 33147

Title: PD () Delete
Name: JOHNSON, ROSETTA
Address: 1441 NW 175 TERRACE
City-St-Zip: MIAMI, FL 33169

Title: S () Delete
Name: HARVEY, ROSA
Address: 2900 NW 190 STREET
City-St-Zip: OPA LOCKA, FL 33056

Title: TD () Delete
Name: JACKSON, SAMUEL
Address: 341 SW 203RD AVE
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: CONSTANCE B. ROBINSON D 10/07/2007
Electronic Signature of Signing Officer or Director Date