2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000007094

Entity Name: JILOU FOUNDATION, INC.

FILED May 26, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

375 NE 54 ST STE 1 MIAMI, FL 33137

Current Mailing Address: New Mailing Address:

375 NE 54 ST STE 1 MIAMI, FL 33137

FEI Number: 01-0663381 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ETIENNE, EDNA 7816 PLANTATION BLVD MIRAMAR, FL 33023

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.

OFFICERS AND DIRECTORS:

SIGNATURE: EDNA ETIENNE Date

City-St-Zip:

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

MONARGENT, CHRISTIAN ETIENNE, EDNA Name: Name: 711 E CHATELAIN BLVD Address: 7816 PLANTATION BLVD Address: City-St-Zip: DELRAY BEACH, FL 33445 MIRAMAR, FL 33023

Title: VD () Delete Title: () Change () Addition

Name: PARDO, ULRICK Name: Address: 2204 SW 132 TERR Address: City-St-Zip: MIRAMAR, FL 33027 City-St-Zip:

Title: () Delete Title: (X) Change () Addition FANFAN, JEAN-CLAUDE Name: BARTHELEMY, FRITZGERALD Name: 11607 CANAL DR #1 Address: Address: 11325 PEACHTREE DR City-St-Zip: NORTH MIAMI, FL 33181 City-St-Zip: MIAMI, FL 33161

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

Name: Name: FRANCOIS, SMITH Address: Address: 911 NE 142ND STREET City-St-Zip: City-St-Zip: NORTH MIAMI, FL 33161

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: EDNA ETIENNE PD 05/26/2005