

**2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Nov 03, 2014  
Secretary of State**

DOCUMENT# N03000000517

**Entity Name:** FOURTH DIMENSION OF SOUTH BEACH, INCORPORATED

**Current Principal Place of Business:**

9 ISLAND AVE.  
APT#902  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

9 ISLAND AVE.  
APT#502  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

9 ISLAND AVE.  
902  
MIAMI BEACH, FL 33139

**New Mailing Address:**

9 ISLAND AVE.  
APT#502  
MIAMI BEACH, FL 33139

**FEI Number:** 04-3757649

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PREM, MIGUEL E MR.  
1225 WEST AVE.  
#301  
MIAMI BEACH, FL 33139 US

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

PARRY, JUDITH  
9 ISLAND AVE.  
APT#502  
MIAMI BEACH, FL 33139 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: JUDITH PARRY

11/03/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTS  
Name: JAMESON, ELLEN  
Address: 9 ISLAND AVE. # 502  
City-St-Zip: MIAMI BEACH, FL 33139

I hereby 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 all other like empowered.

SIGNATURE: ELLEN JAMESON

PTS

11/03/2014

Electronic Signature of Signing Officer or Director

Date