2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000003137

FILED Nov 17, 2008 Secretary of State

Entity Name: ALHAMBRA HEIGHTS RESIDENTIAL FORCE, INC.

Current Principal Place of Business: New Principal Place of Business: 12128 NW 2ND SVE MIAMI, FL 33168 **Current Mailing Address: New Mailing Address:** 12128 NW 2ND SVE 12555 BISCAYNE BLVD. MIAMI, FL 33168 812 N. MIAMI, FL 33181 FEI Number: 71-0922146 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () 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: HILTON, BEVERLY 12495 NW 6 AVE N. MIAMI, FL 33168 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: BEVERLY HILTON Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete ADDISON, RAYMOND ADDISON, RAYMOND Name: Name: 12555 BISCAYNE BLVD. Address: 12128 NW 2ND AVENUE Address: City-St-Zip: N. MIAMI, FL 33181 City-St-Zip: N. MIAMI, FL 33168 Title: () Delete Title: () Change () Addition NELSON, JOCELYN Name: Name: Address: 510 NW 122 ST Address: City-St-Zip: N. MIAMI, FL 33168 City-St-Zip: Title: () Delete Title: () Change () Addition HILTON, BEVERLY Name: Name: 12495 N.W. 6TH AVE. Address: Address: City-St-Zip: N MIAMI, FL 33168 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ALDERSON, ORIEN Name: Address: 11828 SW 7 ST Address: City-St-Zip: PEMBROKE PINES, FL 33025 City-St-Zip: Title: () Delete Title: (X) Change () Addition TATE, THOMAS HORODOWICH, MITCH Name: Name: 245 NW 124TH ST 12495 NW 4TH AVENUE Address: Address: City-St-Zip: MIAMI, FL 33168 City-St-Zip: MIAMI, FL 33168 Title: () Delete Title: () Change () Addition WILLIAMS, GAIL Name: Name: Address: 15225 NE 8TH AVE Address: N MIAMI BEACH, FL 33161 City-St-Zip: 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: BEVERLY HILTON TD 11/17/2008