

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 15, 2007
Secretary of State**

DOCUMENT# N03000004878

Entity Name: 100% ARLINE COMMUNITY DEVELOPMENT, INC.

Current Principal Place of Business:

17650 NW 40TH AVENUE
MIAMI, FL 33055

New Principal Place of Business:

New Mailing Address:

17650 NW 40TH AVENUE
MIAMI, FL 33055

Current Mailing Address:

P.O. BOX 246326
PEMBROKE PINES, FL 33024

FEI Number: 65-0959784 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:

KNIGHTS, SHERIAL
17650 NW 40TH AVENUE
MIAMI, FL 33055 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: SHERIAL A.KNIGHTS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KNIGHTS, EDDISON J
Address: 17650 NW 40TH AVENUE
City-St-Zip: MIAMI, FL 33055

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

Title: D () Delete
Name: KNIGHTS, SHERIAL A
Address: 17650 NW 40TH AVENUE
City-St-Zip: MIAMI, FL 33055

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

Title: D () Delete
Name: KNIGHTS, DENISHA S
Address: 17650 NW 40TH AVENUE
City-St-Zip: MIAMI, FL 33055

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: SHERIAL KNIGHTS

D

10/15/2007

Electronic Signature of Signing Officer or Director

Date