2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N03000007753 FILFD NU LIFE ENTERPRISES, INC. 05 OCT 26 AM 9-43 SECRETALLY OF STATE TALLAHASTER, FLORIDA Principal Place of Business Mailing Address 3576 CHARLES AVE 3576 CHARLES AVE MIAMI, FL 33133 MIAML FL 33133 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 10032005 REIN-NP CR2E099 (6/04) FEI Number APPLIED FOR City & State City & State Applied For Not Applicable Ζip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name YOUNG: ROBERT- ---Street Address (P.O. Box Number is Not Acceptable) -- -3576 CHARLES AVE MIAMI, FL 33133 City Zip Code 8. 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. I am familiar with, and accept SIGNATURE FILE NOW!!! FEE IS \$236.25 Make sheck payable to After January 1, 2006, Fee will be \$297.50 Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. DV TITLE ☐ Delete TITLE Change ☐ Addition **60006045854**6 10/11/05--01002--009 **236.25 WILLIAMS, CALVIN NAME NAME STREET ADDRESS 221 N JEFFERSON DR STREET ADDRESS CITY-ST-ZIP CORAL GABLES, FL 33133 CITY-ST-ZIP DT Addition TITLE ☐ Delete TITLE ☐ Change YOUNG, ROBERT NAME NAME STREET ADDRESS STREET ADDRESS 3576 CHARLES AVE CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33133 ☐ Chance ☐ Addition TITLE ☐ Delete TITLE LEONARD, LEON NAME NAME STREET ADDRESS 3601 FRANKLIN AVE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33133 CITY-ST-ZIP TITI F Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 dame appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:

199e 1072

Robert A. Young, Esq.

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3576 Charles Avenue Miami, FL 33133 305-447-1604

REGULAR MAIL October 20, 2005

Tyrone Scott **Document Specialist Division of Corporations** Florida Department of State P.O. Box 6237 Tallahassee, FL 32314

Re: Federal Employer Identification Number

Dear Sir/Madame:

As per correspondence of October 12, 2005 please find enclosed the Federal Employer Identification (FEI) number: 11-3761053. If there are any questions please feel free to contact undersigned at the number above.

Respectfully,

TEL PROPERTY.