

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 26, 2008
Secretary of State**

DOCUMENT# N04000005349

Entity Name: ISHI, INC.

Current Principal Place of Business:

4303 NORTHWEST 202ND STREET
MIAMI GARDENS, FL 33055 US

New Principal Place of Business:

Current Mailing Address:

4303 NORTHWEST 202ND STREET
MIAMI GARDENS, FL 33055 US

New Mailing Address:

FEI Number: 20-1293470 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:

LONG, HAROLD JR
99 NORTHWEST 193RD STREET
SUITE 127
NORTH MIAMI BEACH, FL 33169 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: HAROLD LONG

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HUZZIE, DONALD L SR.
Address: 4303 NORTHWEST 202ND STREET
City-St-Zip: MIAMI GARDENS, FL 33055 US

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

Title: SD () Delete
Name: HUZZIE, ELAINE M
Address: 4303 NORTHWEST 202ND STREET
City-St-Zip: MIAMI GARDENS, FL 33055 US

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

Title: TD () Delete
Name: HERRIOTT, ANN T
Address: 17530 N.W. 18TH AVENUE
City-St-Zip: MIAMI GARDENS, FL 33056 US

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: DONALD L. HUZZIE

PD

10/26/2008

Electronic Signature of Signing Officer or Director

Date