## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N04000008465

FILED Jan 16, 2008 Secretary of State

Entity Name: PORTRAIT OF THE STARS, INC.

Current Principal Place of Business: New Principal Place of Business:

6321 ISLAND WAY 3411 NW 22 PLACE

MARGATE, FL 33063 COCONUT CREEK, FL 33066

Current Mailing Address: New Mailing Address:

6321 ISLAND WAY 3411 NW 22 PLACE

MARGATE, FL 33063 COCONUT CREEK, FL 33066

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:

CLERMONT, FRANTZ CLERMONT, FRANTZ 6321 ISLAND WAY 3411 NW 22 PLACE

MARGATE, FL 33063 US COCONUT CREEK, FL 33066 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: FRANTZ CLERMONT 01/16/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 CLERMONT, FRANTZ
 Name:
 CLERMONT, FRANTZ

 Address:
 6321 ISLAND WAY
 Address:
 3411 NW 22 PLACE

City-St-Zip: MARGATE, FL 33063 City-St-Zip: COCONUT CREEK, FL 33066

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 CLERMONT, LIONEL
 Name:

 Address:
 3411 NW 22ND PL
 Address:

 City-St-Zip:
 COCONUT CREEK, FL 33063
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 DORCELY, FLORISE
 Name:

 Address:
 1133 NW 45TH TERR
 Address:

 City-St-Zip:
 LAUDERHILL, FL 33133
 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: FRANTZ CLERMONT P 01/16/2008