

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N05000008396 1. Entity Name OBSERVED UNIVERSAL REALIZATION OF SELF INCORPORATED		 <div style="text-align: right;"> FILED 07 MAY 15 AM 8:26 STATE OF FLORIDA MIAMI, FLORIDA </div>	
Principal Place of Business 7801 NORTH EAST FOURTH COURT STE 504 MIAMI, FL 33138		Mailing Address 7801 NORTH EAST FOURTH COURT STE 504 MIAMI, FL 33138	
2. Principal Place of Business - No P.O. Box # 833 NE 90th St Suite, Apt. #, etc. # 5		3. Mailing Address 833 NE 90th St Suite, Apt. #, etc. # 5	
City & State Miami FL		City & State Miami FL	
Zip 33138		Zip 33138	
Country USA		Country USA	
4. FEI Number		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired		<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PETTAWAY, LINCOLN 7801 NORTH EAST FOURTH COURT STE 504 MIAMI, FL 33138		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code </div>	
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 the obligations of registered agent. <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> SIGNATURE <small>Signature, typed or printed name of registered agent and fee if applicable.</small> </div> <div style="width: 40%; text-align: center;"> <small>(NOTE: Registered Agent signature required when reinstating)</small> </div> <div style="width: 20%; text-align: right;"> <small>DATE</small> </div> </div>			
FILE NOW!!! FEE IS \$122.50		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete PETTAWAY, LINCOLN 7801 NORTH EAST FOURTH COURT STE 504 MIAMI, FL 33138	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition PETTAWAY, Lincoln 833 NE 90th St Apt 5 Miami FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete PETTAWAY, DERAMUS 7801 NORTH EAST FOURTH COURT STE 504 MIAMI, FL 33138	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition PETTAWAY DERAMUS 833 NE 90th St Apt 5 Miami FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete MATHEWS, CONNIE 1334 DELIA AKRON, OH 33240	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <div style="text-align: center;"> 500103591935 05/31/07--01010--010 **192.50 </div>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete <div style="text-align: center;"> M 5/23 </div>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <div style="text-align: center;"> 500103591935 05/31/07--01010--010 **130.75 </div>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<div style="text-align: right;"> May 1 2005 <small>Date Daytime Phone #</small> </div>	