

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000001578

**FILED**  
**Oct 16, 2008**  
**Secretary of State**

**Entity Name:** RESECTABLE LODGE PARFAITE HARMONIE INC

**Current Principal Place of Business:**

1308 G ROSE BOULEVARD  
SUITE G  
ORLANDO, FL 32839

**New Principal Place of Business:**

2044 AMERICANA BV  
ORLANDO, FL 32839

**Current Mailing Address:**

1308 G BOULEVARD  
SUITE G  
ORLANDO, FL 32839

**New Mailing Address:**

2044 AMERICANA BV  
ORLANDO, FL 32839

**FEI Number:** 41-2207695      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

CELESTE, ARNOLD  
1555 ROYAL CR  
APOPKA, FL 32703      US

**Name and Address of New Registered Agent:**

JEAN, FRITZ  
2640 CORBYTON CT  
ORLANDO, FL 32828      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: FRITZ JEAN

10/16/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: JEAN, FRITZ  
Address: 2640 CORBYTON CT  
City-St-Zip: ORLANDO, FL 32828

Title: S ( ) Delete  
Name: SMITH, PIERRE  
Address: 1406 W. HOLDEN AVE APT C  
City-St-Zip: ORLANDO, FL 32839

Title: T ( ) Delete  
Name: JEAN, WILFRID  
Address: 6401 MERRIEWOOD DR  
City-St-Zip: ORLANDO, FL 32818

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: T (X) Change ( ) Addition  
Name: MOISE, ROUBENS  
Address: 5602 SILVER STAR APT 631  
City-St-Zip: ORLANDO, FL 32808

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: FRITZ JEAN

P

10/16/2008

Electronic Signature of Signing Officer or Director

Date