2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 12, 2007
Secretary of State

DOCUMENT# N06000003902

Entity Name: THE BLESSING WAVE, INC.

Current Principal Place of Business:

6284 PARADISE COVE
WEST PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

6284 PARADISE COVE
WEST PALM BEACH, FL 33411

New Mailing Address:

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:

LESPERANCE, MYRIELLE
6284 PARADISE COVE
WEST PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

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: MYRIELLE LESPERANCE
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LESPERANCE, MYRIELLE
Address: 6284 PARADISE COVE
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D ( ) Delete
Name: LOZANDIER, MYRLANDE
Address: 6284 PARADISE COVE
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D ( ) Delete
Name: SANON, JENNER
Address: PO BOX 964
City-St-Zip: RICHEPORT, WA 98813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MYRIELLE LESPERANCE MRS 10/12/2007
Electronic Signature of Signing Officer or Director — Date