2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000010961

FILED Oct 31, 2007 Secretary of State

Entity Name: JANEEN MCKENZIE BREAST CANCER AWARENESS FOUNDATION INC. **Current Principal Place of Business: New Principal Place of Business:** 1884 VIOLET AVE WEST PALM BEACH, FL 33415 **Current Mailing Address: New Mailing Address:** 1884 VIOLET AVE WEST PALM BEACH, FL 33415 FEI Number: 20-5760680 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: JOHN T. PAXMAN, P.A. 1832 NORTH DIXIÉ HWY LAKE WORTH, FL 33460 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: JOHN T. PAXMAN, P.A. Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete MCKENZIE, JANEEN MCKENZIE, LESLEY Name: Name: Address: 1884 VIOLET AVE Address: 1884 VIOLET AVE City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: WEST PALM BEACH, FL 33415 Title: () Delete Title: () Change () Addition Name: MACHADO, KYLE Name: Address: 1884 VIOLET AVE Address: City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: Title: (X) Delete Title: () Change () Addition VENDETTI, DAVID Name: Name: 135 LAKE PINE CIRCLE Address: Address: City-St-Zip: LAKE WORTH, FL 33463 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: KYLE MACHADO D 10/31/2007