

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000012171

FILED
Oct 23, 2007
Secretary of State

Entity Name: JAFRICA ORGANIZATION, INC.

Current Principal Place of Business:

4045 SHERIDAN AVE
SUITE 244
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

4045 SHERIDAN AVE
SUITE 244
MIAMI BEACH, FL 33140

New Mailing Address:

9601 WILSHIRE BLVD
#1108
BEVERLY HILLS, CA 90210

FEI Number: **FEI Number Applied For (X)** **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:

Name and Address of New Registered Agent:

BOYENN'E, KAMELA
4045 SHERIDAN AVE
SUITE 244
MIAMI BEACH, FL 33140 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: KAMELA BOYENN'E

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOYENN'E, RUSSI
Address: 4045 SHERIDAN AVE, SUITE 244
City-St-Zip: MIAMI BEACH, FL 33140

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

Title: VP () Delete
Name: KINSALE, KIRTH
Address: 4045 SHERIDAN AVE, SUITE 244
City-St-Zip: MIAMI BEACH, FL 33140

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

Title: S () Delete
Name: BOYENN'E, KAMELA
Address: 4045 SHERIDAN AVE, SUITE 244
City-St-Zip: MIAMI BEACH, FL 33140

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: KAMELA BOYENN'E

SEC

10/23/2007

Electronic Signature of Signing Officer or Director

Date