

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000003365

FILED
Oct 28, 2008
Secretary of State

Entity Name: ROSEN FAMILY FOUNDATION, INC., TALLU & RUBEN ROSEN AND RONI & DON ROSEN

Current Principal Place of Business:

C/O SHUTTS & BOWEN LLP
201 SOUTH BISCAYNE BLVD, STE 1600
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

C/O SHUTTS & BOWEN LLP
201 SOUTH BISCAYNE BLVD, STE 1600
MIAMI, FL 33131

New Mailing Address:

C/O SHUTTS & BOWEN LLP
201 SOUTH BISCAYNE BLVD, STE 1600 (LN)
MIAMI, FL 33131

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

NOSTRO, LOUIS
C/O SHUTTS & BOWEN LLP
201 SOUTH BISCAYNE BLVD, SUITE 1600
MIAMI, FL 33131 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: LOUIS NOSTRO

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROSEN, TALLU
Address: 9999 COLLINS AVENUE, UNIT 11J
City-St-Zip: BAL HARBOUR, FL 33154

Title: D () Delete
Name: ROSEN, DONALD
Address: 136 MONTGOMERY AVENUE
City-St-Zip: BALA CYNWYD, PA 19004

Title: D () Delete
Name: MCELFRESH, LYNN ROSEN
Address: 136 MONTGOMERY AVENUE
City-St-Zip: BALA CYNWYD, PA 19004

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: DONALD ROSEN

D

10/28/2008

Electronic Signature of Signing Officer or Director

Date