

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000003889

FILED
Apr 20, 2009
Secretary of State

Entity Name: OUR HOUSE IN DANIA, INC.

Current Principal Place of Business:

1635 NE 4TH PL, STE. 2
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

840 W. DANIA BEACH BLVD
APT 1
DANIA BEACH, FL 33004

Current Mailing Address:

1635 NE 4TH PL, STE. 2
FT. LAUDERDALE, FL 33301

New Mailing Address:

840 W. DANIA BEACH BLVD
APT 1
DANIA BEACH, FL 33004

FEI Number: 83-0478649 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:

OPTEKAR, DAVID
1635 NE 4TH PL, STE. 2
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

OPTEKAR, DAVID
38 S.E. 11TH STREET
FT. LAUDERDALE, FL 33316 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: DAVID OPTEKAR

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: OPTEKAR, DAVID
Address: 1635 NE 4TH PL, STE. 2
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: D () Delete
Name: WEBBER, LAURA LMHC
Address: 119 S. BEAR POINTE
City-St-Zip: LAKE PLACID, FL 33852

Title: D () Delete
Name: COTE, DIANE
Address: 4715 MAITLAND DR.
City-St-Zip: TAMARAC, FL 33319

Title: D () Delete
Name: WATSON, DONNA
Address: 2655 E OAKLAND PARK BLVD.
City-St-Zip: FT. LAUDERDALE, FL 33306

Title: D () Delete
Name: ZINOVIEVA, NATALIA PHD.
Address: U1. VOSKOVA, 22-10
City-St-Zip: ST. PETERSBURG, RUSSA, 197101

Title: D () Delete
Name: SHABALINA, VALENTINA PHD
Address: PETERSBURGSKOYE SHOSSE, 13/1-230
City-St-Zip: ST. PETERSBURG, RUSSIA, 189620

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: OPTEKAR, DAVID
Address: 38 S. E. 11TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33316

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

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

Title: D (X) Change () Addition
Name: KAPLOWITZ, BARRY DR.
Address: 21110 BISCAYNE BLVD-SUITE 304
City-St-Zip: AVENTURA, FL 33180

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: DAVID OPTEKAR

PRES

04/20/2009

Electronic Signature of Signing Officer or Director

Date