

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000011997

FILED
Mar 27, 2009
Secretary of State

Entity Name: NON PROFIT RESCUE SERVICES INC

Current Principal Place of Business:

119 NE 19TH COURT
G 219
WILTON MANORS, FL 33305

New Principal Place of Business:

6435 CORAL WAY
MIAMI, FL 33155

Current Mailing Address:

PO BOX 11341
FORT LAUDERDALE, FL 33339

New Mailing Address:

6435 CORAL WAY
MIAMI, FL 33155

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:

HAILEY, JOSEPH C JR
119 NE 19TH COURT
G 219
WILTON MANORS, FL 33305 US

Name and Address of New Registered Agent:

STRYDIO, NORMA
6435 CORAL WAY
MIAMI, FL 33155 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: NORMA STRYDIO

03/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HAILEY, JOSEPH C JR
Address: PO BOX 11341
City-St-Zip: FORT LAUDERDALE, FL 33339

Title: VP () Delete
Name: GONIO, MICHAEL
Address: PO BOX 11341
City-St-Zip: FORT LAUDERDALE, FL 33339

Title: T/S (X) Delete
Name: HAILEY, RUTH E
Address: PO BOX 11341
City-St-Zip: FORT LAUDERDALE, FL 33339

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STRYDIO, NORMA
Address: 6435 CORAL WAY
City-St-Zip: MIAMI, FL 33155

Title: D (X) Change () Addition
Name: LOPEZ, GREGG
Address: 6435 CORAL WAY
City-St-Zip: MIAMI, FL 33155

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: NORMA STRYDIO

P

03/27/2009

Electronic Signature of Signing Officer or Director

Date