

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000003351

FILED
Sep 28, 2009
Secretary of State

Entity Name: THESE ARE ALL OUR CHILDREN INC.

Current Principal Place of Business:

701 BRICKELL AVE
MIAMI, FL 33131

New Principal Place of Business:

100 BISCAYNE BLVD
SUITE 2906
MIAMI, FL 33132 US

Current Mailing Address:

16850-112 COLLINS AVE SUITE 314
MIAMI BEACH, FL 33160

New Mailing Address:

16850-112 COLLINS AVE
SUITE 314
MIAMI BEACH, FL 33160 US

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:

A1A REGISTERED AGENT, INC.
5647 110TH AVE NORTH
ROYAL PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

A1A REGISTERED AGENT INC.
5647 110TH AVE NORTH
ROYAL PALM BEACH, FL 33411 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: TINA MAKI

09/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GREEN, DEIRDRE M
Address: 16850 COLLINS AVE
City-St-Zip: SUNNY ISLES BEACH, FL 33132

Title: DV () Delete
Name: SPRINGER, DELIA
Address: PO BOX 32311
City-St-Zip: NEWARK, NJ 07102

Title: DST () Delete
Name: SPRINGER, KARIM
Address: PO BOX 32311
City-St-Zip: NEWARK, NJ 07102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GREEN, DEIRDRE M
Address: 16850 COLLINS AVE
City-St-Zip: SUNNY ISLES BEACH, FL 33132 US

Title: TS (X) Change () Addition
Name: SPRINGER, DELIA
Address: PO BOX 32311
City-St-Zip: NEWARK, NJ 07102 US

Title: VP (X) Change () Addition
Name: SPRINGER, KARIM
Address: 1181 MAIN STREET #10C
City-St-Zip: RAHWAY, NJ 07065 US

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: DEIRDRE M GREEN

DP

09/28/2009

Electronic Signature of Signing Officer or Director

Date