

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000004198

FILED  
Oct 14, 2009  
Secretary of State

Entity Name: J. ALLEN ALLSTARS FOUNDATION, INC

## Current Principal Place of Business:

7848 DILIDO BLVD  
MIRAMAR, FL 33023 US

## New Principal Place of Business:

## Current Mailing Address:

7848 DILIDO BLVD  
MIRAMAR, FL 33023 US

## New Mailing Address:

FEI Number: 26-2452445      FEI Number Applied For ( )      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:

FRANKEL, MITCH  
2799 NW BOCA RATON BLVD  
203  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

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: MITCH FRANKEL

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ALLEN, JASON  
Address: 3370 N. E. 190TH ST #909  
City-St-Zip: AVENTURA, FL 33180 US

Title: VP ( ) Delete  
Name: ROACH, LATISH  
Address: 7848 DILIDO BLVD  
City-St-Zip: MIRAMAR, FL 33023 US

Title: S ( ) Delete  
Name: ALLEN, CYNTHIA  
Address: 2002 EDWARDS AVE  
City-St-Zip: MUSCLE SHOALS, AL 35661 US

## 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: LATISH ROACH

VP

10/14/2009

Electronic Signature of Signing Officer or Director

Date