

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000004914

FILED
Jan 06, 2010
Secretary of State

Entity Name: THE ALLIANCE FOR THE ADVANCEMENT OF ADULT STEM CELL THERAPY AND RESEARCH,
INCORPORATED

Current Principal Place of Business:

801 LAUREL OAK DRIVE #618
NAPLES, FL 34108

New Principal Place of Business:

9500 BONITA BEACH ROAD
SUITE 211
BONITA SPRINGS, FL 34135 US

Current Mailing Address:

801 LAUREL OAK DRIVE #618
NAPLES, FL 34108

New Mailing Address:

9500 BONITA BEACH ROAD
SUITE 211
BONITA SPRINGS, FL 34135 US

FEI Number: 26-3022664

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHWARTZ, PAUL
801 LAUREL OAK DRIVE #618
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

SCHWARTZ, PAUL AGENT
9500 BONITA BEACH ROAD
SUITE 211
BONITA SPRINGS, FL 34135 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: PAUL SCHWARTZ

01/06/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: ZANNOS, GREKOS G MD
Address: 9500 BONITA BEACH ROAD
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: VP
Name: VAMRAS, MARIA
Address: 6626 ILEX CIRCLE
City-St-Zip: NAPLES, FL 34109 US

Title: VP
Name: MALO, NEIM
Address: 812 PINE CREEK LANE
City-St-Zip: NAPLES, FL 34108 US

Title: VP
Name: SCHIFFMAN, ALAN
Address: 9500 BONITA BEACH ROAD
City-St-Zip: BONITA SPRINGS, FL 34135 US

I hereby 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 all other like empowered.

SIGNATURE: ZANNOS GREKOS

MNG

01/06/2010

Electronic Signature of Signing Officer or Director

Date