

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000007936

FILED
May 26, 2010
Secretary of State

Entity Name: BETHESDA CLINIC OF HEALING, INC.

Current Principal Place of Business:

14627 NW 7TH AVE
MIAMI, FL 33168

New Principal Place of Business:

Current Mailing Address:

14627 NW 7TH AVE
MIAMI, FL 33168

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALSAINT, JEAN DR.
14627 NW 7TH AVE
MIAMI, FL 33168 US

Name and Address of New Registered Agent:

ANDY, ANTENOR
6011 RODMAN ST
104
HOLLYWOOD, FL 33023 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: ANDYANTENOR

05/26/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: BRUCE, MARIE LEGER
Address: 15321 SW 47TH ST
City-St-Zip: MIRAMAR, FL 33027

Title: VP
Name: ANDY, ANTENOR
Address: 6011 RODMAN ST STE 104
City-St-Zip: HOLLYWOOD, FL 33023

Title: D
Name: GERVAIS, SANNERY
Address: 15321 SW 47TH ST
City-St-Zip: MIRAMAR, FL 33027

Title: D
Name: GERVAIS, SHERLYN
Address: 15321 SW 47TH ST
City-St-Zip: MIRAMAR, FL 33027

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: ANDYANTENOR

MISS

05/26/2010

Electronic Signature of Signing Officer or Director

Date