

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000009264

FILED  
Oct 11, 2009  
Secretary of State

Entity Name: MEN 2 MEN INC.

## Current Principal Place of Business:

4749 GLADIATOR CIRCLE  
GREEN ACRES, FL 33463

## New Principal Place of Business:

## Current Mailing Address:

4749 GLADIATOR CIRCLE  
GREEN ACRES, FL 33463

## New Mailing Address:

FEI Number: 80-0279454      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:

## Name and Address of New Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DR., SUITE 4  
WESTON, FL 33331      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: GEORGE MCFADDEN

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: CEO      ( ) Delete  
Name: MCFADDEN, GEORGE FOUNDER  
Address: 4749 GLADIATOR CIRCLE  
City-St-Zip: GREEN ACRES, FL 33463

Title: D      ( ) Delete  
Name: ARAFAT, PRINCE CO/FOUN  
Address: 813 SW 10TH STREET  
City-St-Zip: DELRAY BEACH, FL 33444

Title: V      ( ) Delete  
Name: QUINCE, BERNARD  
Address: 36 SW 10TH STREET  
City-St-Zip: DELRAY BEACH, FL 33444

Title: ST      ( ) Delete  
Name: PENN, LUVONIA  
Address: 1324 PROSPECT STREET  
City-St-Zip: DELRAY BEACH, FL 33444

## 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:

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: GEORGE MCFADDEN

CEO

10/11/2009

Electronic Signature of Signing Officer or Director

Date