

# 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000011367

**FILED**  
**Oct 05, 2014**  
**Secretary of State**

**Entity Name:** AQUA ANGEL PARENTS, INC.

**Current Principal Place of Business:**

500 NW 12TH AVE  
FT LAUDERDALE, FL 33311

**New Principal Place of Business:**

500 NW 12TH AVE  
FT LAUDERDALE, FL 33311 UN

**Current Mailing Address:**

500 NW 12TH AVE  
FT LAUDERDALE, FL 33311

**New Mailing Address:**

**FEI Number:** 94-3466054

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHAFFIN, NARA  
7331 NW 20TH ST  
SUNRISE, FL 33313 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:** NARA CHAFFIN

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** CHAFFIN, NARA  
**Address:** 7331 NW 20TH ST  
**City-St-Zip:** SUNRISE, FL 33313

**Title:** D  
**Name:** EASTER, AUDRA  
**Address:** 500 NW 12TH AVE  
**City-St-Zip:** FT LAUDERDALE, FL 33311

**Title:** D  
**Name:** WILLIAMS, KENNA  
**Address:** 3841 NW 5 CT  
**City-St-Zip:** FT LAUDERDALE, FL 33311

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:** NARA CHAFFIN

D

10/05/2014

Electronic Signature of Signing Officer or Director

Date