

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N13000001979

FILED
Oct 21, 2014
Secretary of State

Entity Name: GLOBAL HEALTH VISIONARY ALTERNATIVES INC.

Current Principal Place of Business:

1517 SW 24 ST
FT LAUDERDALE, FL 33315

New Principal Place of Business:

Current Mailing Address:

PO BOX 350513
FT LAUDERDALE, FL 33335

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INCORP SERVICES, INC
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

PARZIALE, KATHERINE M
1517 SW 24 ST
FT LAUDERDALE, FL 33315 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: KATHERINE M PARZIALE

10/21/2014

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: GALAMAGA, JOHN
Address: 4429 WHITE FEATHER TRAIL
City-St-Zip: BOYNTON BEACH, FL 33406

Title: T
Name: MARTIRE, FRANK
Address: 516 N OGDEN AVE STE 162
City-St-Zip: CHICAGO, IL 60642

Title: D
Name: LIBOW, MICHAEL
Address: PO BOX 350513
City-St-Zip: FT LAUDERDALE, FL 33335

Title: S
Name: PARZIALE, KATHERINE
Address: PO BOX 350513
City-St-Zip: FT LAUDERDALE, FL 33335

Title: D
Name: TONG, GARY
Address: 15035 JACKSON RD
City-St-Zip: DELRAY BEACH, FL 33484

Title: D
Name: CANTER, FRANCIE R
Address: 4748 S OCEAN BLVD SUITE 1506
City-St-Zip: HIGHLAND BEACH, FL 33487

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: KATHERINE M PARZIALE

S

10/21/2014

Electronic Signature of Signing Officer or Director

Date