2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 06, 2008
Secretary of State

DOCUMENT# N23874

Entity Name: BALLET ETUDES OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

415 WEST 51 PLACE
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

PO BOX 813591
HOLLYWOOD, FL 33081-3591

New Mailing Address:

FEI Number: 65-0020384 **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:

ISIS VALLE, PA
150 SE 2 AVE
900
MIAMI, FL 33131 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: ISIS VALLE

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: PRIETO, JOSE F
Address: 1032 W 79 ST
City-St-Zip: HIALEAH, FL

Title: VPD ( ) Delete
Name: ELDEN, DOMINIQUE M
Address: PO BOX 813591
City-St-Zip: HOLLYWOOD, FL 33081-3591

Title: DT ( ) Delete
Name: ELDEN, HARRY R
Address: 19410 E OAKMONT DR
City-St-Zip: HIALEAH, FL 330152008

Title: S ( ) Delete
Name: ELDEN, ANDREW C
Address: PO BOX 813591
City-St-Zip: HOLLYWOOD, FL 33081-3591

Title: VS ( ) Delete
Name: ACOSTA, PEDRO
Address: 1750 W 46 ST, #118
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: PRIETO, JOSE F
Address: 1012 W 79 ST
City-St-Zip: HIALEAH, FL 33014

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: HARRY ELDEN DT 10/06/2008

Electronic Signature of Signing Officer or Director — Date