## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N99000001762

Entity Name: AMARANTHINE, INC.

FILED Sep 18, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4186 PAMONA AVE

COCONUT GROVE, FL 33133

Current Mailing Address: New Mailing Address:

4186 PAMONA AVE

COCONUT GROVE, FL 33133

FEI Number: 91-1976214 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BUSCH, SCHERLEY 4186 PAMONA AVE

COCONUT GROVE, FL 33133 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: SCHERLEY BUSCH

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change( ) Addition

Name: OLAUAKLIN, JEANNE Name: KEMPLER, ELLEN

 Address:
 BARRY UNIVERSITY 1180 NE ONE DR
 Address:
 7090 SW 48 LANE

 City-St-Zip:
 MIAMI, FL 33161
 City-St-Zip:
 MIAMI, FL 33155

Name: COOPER, LEONA Name: YELEN, JAN A

Address: 200 WASHINGTON DRIVE Address: 1104 PONCE DE LEON BOULEVARD City-St-Zip: CORAL GABLES, FL 33133 City-St-Zip: CORAL GABLES, FL 33134

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 AZANIR, JULIE
 Name:
 FREEDMAN, ANNE

 Address:
 4180 VENTURA
 Address:
 10401 SW 82 COURT

 City-St-Zip:
 COCONUT GROVE, FL 33133
 City-St-Zip:
 MIAMI, FL 33156

Title: T ( ) Delete Title: PD (X) Change ( ) Addition

Name: FRIEDMAN, JUDY Name: TRIPATHY, SATS

Address: 2801 PONCE DE LEON, #570 Address: 11045 GIRASOL AVENUE

Address: 2801 POINCE DE LEON, #970 Address: 11045 GIRASOL AVENUE
City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL

Title: SD ( ) Delete Title: D (X) Change ( ) Addition Name: FREEDMAN, ANNE Name: O'SULLIVAN, MARY JO

Address: 1541 SUNSET DRIVE, #201 Address: 14265 SW 73 STREET

City-St-Zip: CORAL GABLES, FL 33143 City-St-Zip: MIAMI, FL 33183

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 CAMERON, LYNNE
 Name:

 Address:
 886 MERORES
 Address:

 City-St-Zip:
 MIAMI, FL 33134
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SCHERLEY BUSCH RA 09/18/2006