

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000017022

FILED
Feb 23, 2005
Secretary of State

Entity Name: CAREY, ROYAL, RAMN FUNERAL HOME, INC.

Current Principal Place of Business:

5235 N.W. 7TH AVE.
MIAMI, FL 33127

New Principal Place of Business:

5235 N.W. 7TH AVE.
MIAMI, FL 33127 US

Current Mailing Address:

5235 N.W. 7TH AVE.
MIAMI, FL 33127

New Mailing Address:

5235 N.W. 7TH AVE.
MIAMI, FL 33127 US

FEI Number: 65-0373484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROYAL, JEANNETTE K
5235 N.W. 7TH AVE.
MIAMI, FL 33127 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: JEANNETTE K ROYAL

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CAREY III, WILLIAM L DP
Address: 5235 NW 7TH AVENUE
City-St-Zip: MIAMI, FL 33127

Title: SECR () Delete
Name: ROYAL, JEANNETTE K SECRET
Address: 5235 NW 7TH AVENUE
City-St-Zip: MIAMI, FL 33127

Title: COOR () Delete
Name: HOOD, JARREN COORDI
Address: 5235 NW 7TH AVENUE
City-St-Zip: MIAMI, FL 33127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CAREY III, WILLIAM L DP
Address: 5235 NW 7TH AVENUE
City-St-Zip: MIAMI, FL 33127 US

Title: SECR (X) Change () Addition
Name: ROYAL, JEANNETTE K SECRET
Address: 5235 NW 7TH AVENUE
City-St-Zip: MIAMI, FL 33127 US

Title: COOR (X) Change () Addition
Name: HOOD, JARREN COORDI
Address: 5235 NW 7TH AVENUE
City-St-Zip: MIAMI, FL 33127 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM L CAREY III

DP

02/23/2005

Electronic Signature of Signing Officer or Director

Date