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2008 FOR PROFIT CORPORATION REINSTATEMENT	
DOCUMENT # P0000047749 1. Entity Name CLARENCE HOUSE, INC.	FILED 08 OCT 22 PM 4: 10
Principal Place of Business 311 NW 42 COURT 101 DEERFIELD BEACH, FL 33064 Mailing Address P.O. BOX 5218 LIGHTHOUSE POINT, FL 3307	SECRETARY OF STATE TALLAHASSEE, FLORID; REINSTATEMENTO
DO NOT WRITE IN THIS SPA	07072008 No Chg-P CR2E034 (11/05) 4. FEI Number 65-1014477 5. Certificate of Status Desired
6. Name and Address of Current Registered Agent DASH, HARRIET 2821 NE 55 PLACE FT. LAUDERDALE, FL 33308	DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	
FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008 9. Election Campaign Fina Trust Fund Contribution	· - ++:
10. OFFICERS AND DIRECTORS TITLE P NAME DASH, HARRIET STREET ADDRESS CITY-ST-ZIP LIGHTHOUSE POINT, FL 33074 TITLE NAME	200136979189 10716/0801030016 ***50,00 200137174162 10/22/0801035003 **200,00
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO-NOT-WRITE
TITLE NAME STREET ADDRESS CITY - ST-ZIP	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	
NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the elements of the state	exemptions contained in Chapter 119, Florida Statutes. I further certify that the information mature shall have the same legal effect as if made under oath; that I am an officer or director
Indicated of this point of support of support of the corporation of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: ### To -7 - 08 954 - 946 3448 Bignature and typed or printed Mane of Signing Officer or Director PRES/DEAT Date Dayling Phone 9	