2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000070648

TOLEDO, JORGE

City-St-Zip: MIAMI, FL 33196

11532 SW 152ND PLACE

Name:

Address:

FILED Sep 30, 2005 Secretary of State

Entity Nar	me: RHEMA	ANAGEMENT SERVICES, INC.				
Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:		
#E-102	DES CIRCLE FL 33327					
Current M	ailing Addre	ess:	New Mailing Address	New Mailing Address:		
#E-102	DES CIRCLE FL 33327					
FEI Number:	65-1026242	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and Address o	of New Registered Agent:		
RIOS, ELIS 2800 GLAI # E-102 WESTON,		JS	RIOS, ELSA C 2800 GLADES CIRC # E-102 WESTON, FL 33327	2800 GLADES CIRC		
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,		
SIGNATUR	RE: RIOS, E	ILSA		09/30/2005		
	Electro	onic Signature of Registered Age	ent	Date		
		93(2)(b), F.S., the corporation did no	t receive the prior notice.			
	S AND DIRE	=	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD (PADRON, HU 629 SILVER I LONGWOOD	BIRCH PL	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (PADRON, EN 629 SILVER I LONGWOOD	BIRCH PL	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (PADRON, RIO 629 SILVER I LONGWOOD	BIRCH PL	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	PIACQUADIO	ATER TERRACE #107	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title:	D () Delete	Title:	() Change () Addition		

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.

Name:

Address:

City-St-Zip:

	SIGNATURE:	PADRON, HUMBERTO	PD	09/30/2005
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