

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000110345

FILED  
Oct 26, 2007  
Secretary of State

Entity Name: A TOUCH OF CLASS WHO, INC.

**Current Principal Place of Business:**

4515 SW 22ND STREET  
HOLLYWOOD, FL 33023 US

**New Principal Place of Business:**

**Current Mailing Address:**

4515 SW 22ND STREET  
HOLLYWOOD, FL 33023 US

**New Mailing Address:**

FEI Number: 65-1108941

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BROWN, GLORIA J  
4515 SW 22ND STREET  
HOLLYWOOD, FL 33023 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: GLORIA BROWN

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: D ( ) Delete  
Name: BROWN, GLORIA J  
Address: 4515 SW 22ND STREET  
City-St-Zip: HOLLYWOOD, FL 33023

Title: D ( ) Delete  
Name: BROWN, STELLA M  
Address: 4515 SW 22ND STREET  
City-St-Zip: HOLLYWOOD, FL 33023

Title: D ( ) Delete  
Name: BROWN, RONNIE  
Address: 4515 SW 22ND STREET  
City-St-Zip: HOLLYWOOD, FL 33023

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RONNIE BROWN

D

10/26/2007

Electronic Signature of Signing Officer or Director

Date