2008 FOR PROFIT CORPORATION REINSTATEMENT

PRINCIPAL PRICE OF BUSINESS ROAD SIT ON CARRY STATE SUCCESS ROAD SUCC	DOCUMENT #P0100086362 1. Entity Name BE SAFE HOMES, INC.						08 DEC	ILED	56
2. Principal Place of Business - No PO. Box 8 6 14 OLD COURT ROAD 3. Mailting Address 5 5. Sate, Apr 4 sc. APT 230 City & Suste BOCA RATON : FL. Zip	Principal Place of Business Mailing Address						i i i i i i i i i i i i i i i i i i i	ADY OF ST	TE
2. Principal Place of Blasheres - No PO. Box 9 6 14 OLD COURT ROAD Solto, Apt 4 etc. APT 2:30 Coy 4 Salte BOCA RATON : FL Zip Coy 5 Salte Solto, Apt 4 etc. APT 2:30 Coy 4 Salte BOCA RATON : FL Zip Cov 5 Salte To Applied For Nox Applie	#13						SEURE ANSSEE FLORIDA		
SUITA, AND AT DECEMBER AND SUITA, AND A, F. etc. APT 2300 CRY & State CRY & Stat			BOCA RATON, FL 33433						
City & State By Can RATON F City & State City & State Country Sp Country St. 75 Augment St. 75	6141	OLD COURT ROAD						III WWW III III III III III III III III	
BOCA RATON : FL Zp Zp Country 8. Gerificate of Status Desired \$8.75 Addroned \$8.75	IQA_					1024200	IIA944 I EIA	(\$203 098 (1/07)	08
Zo	3000	, RATON ; FL	City & State						
PHILLIPS, PETER 6141 OLD COURT RD APT 230 BOCA RATON, FL 33433 City FL Zp Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. Dott. FILE MOWITI FEE IS \$150.00 OFFICERS AND DIRECTORS 11. ADDITIONS/CHAMACES TO OFFICERS AND DIRECTORS IN 11 TILE OFFICERS AND DIRECTORS IN 11 INC.	Zip Country		Žíp	Country		5. Certificate	e of Status Desired	\$8.75 Ad	ditional
PHILLIPS, PETER 8141 OLD COURT RD APT 230 BCCA RATON, FL 33433 City FL Zip Code 6. 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. PETER PHILLIPS Signature PHILLIPS, PETER NOWITI FEE IS \$150.00 After Jamusry 1, 2009, Fee with the \$300.00 In accordance with s. 607,193(2)(b), F.S., the corporation did not receive the prior notice. PHILLIPS, PETER NAB DIRECTORS III. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III. NAB SIREI MORES GIT-S1-2P III. NAB SIREI MORES GIT-		6. Name and Address of Current							
Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) ATT 230 BOCA RATON, FL 33433 City FL Zip Code 8. The above named entity submits his statement for the purpose of changing fits registered agent, or both, in the State of Florida. I am familiars with, and sccept the obligations of registered agent, or both, in the State of Florida. I am familiars with, and sccept the obligations of registered agent, or both, in the State of Florida. I am familiars with, and sccept the obligations of registered agent, or both, in the State of Florida. I am familiars with, and sccept the obligations of registered agent, or both, in the State of Florida. I am familiars with, and sccept the obligations of registered agent, or both, in the State of Florida. I am familiars with, and sccept the obligations of registered agent, or both, in the State of Florida. SIGNATURE PHILLIPS, PETER OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME SIRELI AUMRES	6141 OLD COURT RD APT 230				Name				
E. 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 eccept the obligations of registered agent. PETER PHILES Quite					Street Address (P.O. Box Number is Not Acceptable)				
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. PETER PHILIPS D. 26	BOCA RATO	DN, FL 33433		Ci			•	FL Zip Coo	le
THE NOWNII FEE IS \$150.00 After Jassuary 1, 2009, Fee with the \$300.00 10. OFFICER AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THE NAME STREET ADDRESS CITY-ST-2P THE NOWNIE FEE IS \$150.00 COFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THE NAME STREET ADDRESS CITY-ST-2P	8. The above n	amed entity submits this statement to	r the oursose of changing it	s registere	ed office or registe	red agent or bo	oth, in the State of Florida		and accept
19. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE MARE PHILLIPS, PETER	SIGNATURE PHILLIPS Signature, typool or printed name of registered agent and total 4 applicable. PETER PHILLIPS Signature, typool or printed name of registered agent and total 4 applicable. PROTE: Registered Agent algorithms registred when reharbiling DATE FILE NOWNTI FEE IS \$150.00 In accordance with s. 607,193(2)(b), F.S., the								
TITLE INMAE PHILLIPS, PETER 6141 OLD COURT RD APT 230 BOCA RATON, FL 33433 TITLE INMAE STREET ADDRESS CITY-ST-2P TITLE INMAE STREET ADDRESS CITY	After January 1, 2009, Fee will be \$300.00 - corporation did not receive the prior notice.								
MAIR STREET ADDRESS CITY-ST-2P Change Addition Additio						······································			
MALE STREET ADDRESS CITY-ST-ZIP TITLE MALE STREET ADDRESS CITY-ST-ZIP TITLE MALE STREET A	STREET ADDRESS (PHILLIPS, PETER 5 6141 OLD COURT RD APT 230			ET ADORESS	12/0	0013832 1/0801040	2 5710 005 **150	1
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changed, or on an attachment with an address, with all other like empowered.									
SIGNATURE: SIGNATURE AND TYPED OR PRINTED MAME OF SECURITY OR DIRECTOR DOIS DOSCOTOR DOIS DOSCOTOR									