

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000021574

Entity Name: NEW WORLD LIFE SCIENCES, INC.

FILED
Oct 26, 2004
Secretary of State

Current Principal Place of Business:

2655 LE JEUNE ROAD
501
MIAMI, FL 33134

New Principal Place of Business:

Current Mailing Address:

2655 LE JEUNE ROAD
501
MIAMI, FL 33134

New Mailing Address:

FEI Number: 33-1014806 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FIGAROLA, JAIME A
2055 S LE JUENE ROAD
STE 501
MIAMI, FL 33134 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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FIGAROLA, JAIME A
Address: 2655 S LE JEUNE RD STE 501
City-St-Zip: MIAMI, FL 33134

Title: SD () Delete
Name: WOOD, MICHAEL
Address: 2655 S LE JEUNE RD STE 501
City-St-Zip: MIAMI, FL 33134

Title: DVP () Delete
Name: WILLIMON, JOHN A
Address: 2655 S LE JEUNE RD STE 501
City-St-Zip: MIAMI, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: SHEA, JOHN T CFO
Address: 2655 LE JEUNE RD SUITE 501
City-St-Zip: MIAMI, FL 33134

Title: DVP (X) Change () Addition
Name: WILLIMANN, JOHN A
Address: 2655 S LE JEUNE RD STE 501
City-St-Zip: MIAMI, FL 33134

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: JOHN T SHEA

CFO

10/26/2004

Electronic Signature of Signing Officer or Director

Date