2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 09, 2009
Secretary of State

DOCUMENT# P02000050936

Entity Name: HUMANITY MEDCARE, INC.

Current Principal Place of Business:

2500 RHODE ISLAND AVE
FORT PIERCE, FL 34947

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 490206
LAUDERDALE LAKES, FL 33349

New Mailing Address:

FEI Number: 80-0294977 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOSZ, JOSEPH R
200 S. BISCAYNE BLVD.
SUITE 4650
MIAMI, FL 33131 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: JOSEPH GOSZ

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: GARCON, GREGOIRE
Address: 4297 NORTH STATE ROAD 7
City-St-Zip: LAUDERDALE LAKES, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GREGOIRE GARCON OWNE 10/09/2009

Electronic Signature of Signing Officer or Director — Date