

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000065995				FILED		
1. Entity Name LITTLE ANGELS HOMECARE, INC.						
				05 DEC -6 PM 3:5	*	
Principal Place of Business		Mailing Address		SECILE JATE TALLAHAŠSEE, FLORIDI		
402 LANGHOLM DR. WINTER PARK, FL 32789		402 LANGHOLM DR. Winter Park, Fl. 32789		TALLAMASSEE, FLORIDA	A	
2. Principal Place of Business SAME as above		3. Mailing Address SAME as above				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		REMISENTENDEN	(6/04)	
City & State		City & State		4. FEI Number 36-4502069	Applied For Not Applicable	
Zip	Country (0, 5, 0	Zip	Country U.S.A.	5 Certificate of Status Desired \$	8.75 Additional	
	6. Name and Address of Current F		<u>U131/11</u>	7. Name and Address of New Registered Ag	e Required ent	
TASEL, HELEN						
402 LONGHOLM DR WINTER PARK, FL 32789			Street Address (P.O. Box Number is Not Acceptable)			
City				FL Zip Code		
8. 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.						
SIGNATURE Neglet by Van Tassel 12-2-05 Signature, typed or printed name of regularity agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
Signature, typed or printed name of regisferbd agent and title if applicable. (NOTE: Registered Agent algoriture required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After January 1, 2006, Fee will be \$300.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.						
10. TITLE			11.	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 11 Change	
NAME	VAN TASSEL, HELEN M.		NAME			
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP			
TITLE NAME			TITLE NAME		Change Addition	
STREET ADDRESS	STI		STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP TITLE		Change Addition	
NAME	NAM		NAME		- · -	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	5000520146 (12/08/0501035007	**150.00	
TITLE NAME		☐ Delete	TITLE		Change Addition	
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP		☐ Delete	CITY-ST-ZIP TITLE	[Change Addition	
NAME STREET ADDRESS			NAME Street address			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE NAME	_ *****		TITLE Name		Change	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						
SIGNATURE: When M. Vantassel 12-2-05 407-599-7264 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Dieto Deptin Proce 2005 Mitchell Deptin Proce 2005						
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Detro Detr						
				MAttchell DLO	.	

who set this

UP had. HVantask

November 2, 2005

To Whom It May Concern/Barbara Mitchell,

This letter is in reference to our conversation that we had on Monday the 31st of October. I, Helen VanTassel, have been made aware of the mistake I made by accidentally sending my 150.00 annual fee and my 2005 annual report for my S-corporation to the offices of the Internal Revenue Service instead of to the offices of the Divisions of Corporations.

Enclosed please find my new check for 150.00 and the correct form for 2005. By sending you these items in a timely manner now that I know I sent them originally to the wrong place please reinstatement my S-Corporation Little Angels Homecare Inc. immediately with no penalties. Here is the document number you'll need: PO2+100065995 - See Card. Differ-

P020000065995

My phone number is 1-407-599-7264-home

My cell is 1-321-356-5547-cell- if I can't be reached on my home phone. Please call and let me know if I need to do anything else. Thank You in advance for helping me straighten this out.

Sincerely, Alen M. Van Tassel President

Helen VanTassel-President

Little Angels Homecare Inc.