

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000081275

**FILED**  
**Mar 02, 2006**  
**Secretary of State**

**Entity Name:** CHRISTIAN NURSING OF HEALTH CAREERS ACADEMY INC.

**Current Principal Place of Business:**

1620 N.W. 38TH AVENUE  
LAUDERDALE, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

1620 N.W. 38TH AVENUE  
LAUDERDALE, FL 33313

**New Mailing Address:**

**FEI Number:** 16-1638793      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

HERAUX, REYNOLD  
15343 SW 42 TERRACE  
MIAMI, FL 33185    US

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

JEUDY, YVES J  
554 NW 54TH STREET  
MIAMI, FL 33127    US

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: YVES JEUDY

03/02/2006

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: PSD ( ) Delete  
Name: HERARD, JESULA J  
Address: 18800 NW 2 AVE STE 101  
City-St-Zip: MIAMI, FL 33159

Title: V ( ) Delete  
Name: HERARD, GUY FRANTZ  
Address: 1441 NW 7TH AVE.  
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: T ( ) Delete  
Name: CHARLES, GERARD  
Address: 1620 NW 38TH AVE.  
City-St-Zip: LAUDERHILL, FL 33313

**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 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: JESULA HERARD

PSD

03/02/2006

Electronic Signature of Signing Officer or Director

Date