

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000098946

FILED
Jun 10, 2009
Secretary of State

Entity Name: ALL CARE RESIDENTIAL TREATMENT CENTERS, INC.

Current Principal Place of Business:

18901 SW 97 AVE
MIAMI, FL 33157

New Principal Place of Business:

2655 LEJEUNE ROAD
SUITE 502
CORAL GABLES, FL 33134

Current Mailing Address:

18969 SW 80TH COURT
MIAMI, FL 33157

New Mailing Address:

2655 LEJEUNE ROAD
SUITE 502
CORAL GABLES, FL 33134

FEI Number: 82-0563513

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RODRIGUEZ, JOSE M
18969 SW 80TH COURT
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

VAZQUEZ, MANUEL
2655 LEJEUNE ROAD
SUITE 502
CORAL GABLES, FL 33134 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: S/ MANUEL VAZQUEZ

06/10/2009

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: RODRIGUEZ, JOSE M
Address: 18969 SW 80TH COURT
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: RODRIGUEZ, SUSANA C
Address: 18969 SW 80TH COURT
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: RODRIGUEZ, JOSE M
Address: 709 WEBB ROAD
City-St-Zip: ELLENBORO, NC 28040

Title: D (X) Change () Addition
Name: RODRIGUEZ, SUSANA C
Address: 709 WEBB ROAD
City-St-Zip: ELLENBORO, NC 28040

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: S/ SUSANA RODRIGUEZ

D

06/10/2009

Electronic Signature of Signing Officer or Director

Date