

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000011592

FILED
Oct 08, 2009
Secretary of State

Entity Name: PSYCHOTHERAPEUTIC HEALING ARTS, CORP.

Current Principal Place of Business:

10305 NW 41 STREET
#205
DORAL, FL 33178

New Principal Place of Business:

Current Mailing Address:

10750 NW 66 STREET #201
DORAL, FL 33178

New Mailing Address:

10720 NW 66 STREET #407
DORAL, FL 33178

FEI Number: 02-0682325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PENA, FRANCISCO
11260 NW 58 TERRACE
DORAL, FL 33178 US

Name and Address of New Registered Agent:

PENA, FRANCISCO
10720 NW 66 STREET #407
DORAL, FL 33178 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: FRANCISCO PENA

10/08/2009

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: PENA, FRANCISCO
Address: 10750 NW 66 STREET #201
City-St-Zip: DORAL, FL 33178

Title: D () Delete
Name: BETANCUR, OLGA A
Address: 10750 NW 66 STREET #201
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PENA, FRANCISCO
Address: 10720 NW 66 STREET #407
City-St-Zip: DORAL, FL 33178

Title: D (X) Change () Addition
Name: BETANCUR, OLGA A
Address: 10720 NW 66 STREET #407
City-St-Zip: DORAL, FL 33178

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: FRANCISCO PENA

PRES

10/08/2009

Electronic Signature of Signing Officer or Director

Date