2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000026774

FILED Nov 22, 2005 Secretary of State

Entity Nar	me: MIAMI TO	OTAL HEALTH, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
P.O. BOX NORTH M	612382 IAMI, FL 3318	1 US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O. BOX NORTH M	612382 IAMI, FL 3318	1 US			
FEI Number:	: 02-0681401	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
NORTH M The above	AYSHORE DF IAMI, FL 3318	1 US	ne purpose of changing its registered	office or registered agent, or both,	
	RE: YURI RO	DRIGUE7			
0.014, (1.01		nic Signature of Registered	Agent	Date	
		3(2)(b), F.S., the corporation di g Trust Fund Contribution ().	d not receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	RODRIGUEZ,	HORE DRIVE #403	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	JONES, RACHI	HORE DRIVE #403	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: YURI RODRIGUEZ D 11/22/2005