2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000057954

Entity Name: HEALTH EDUCATION TRAINING SCHOOL, INC.

FILED Nov 10, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7823 NE 2ND AVENUE MIAMI, FL 33138

Current Mailing Address: New Mailing Address:

7921 NE 2ND AVENUE 505 NE 125TH STREET MIAMI, FL 33138 MIAMI, FL 33161

FEI Number: 73-1674640 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:

RUGENE, OSNI ROBIN, ERMANE G
7921 N E 2ND AVE. 505 NE 125TH STREET
MIAMI, FL 33138 US MIAMI, FL 33161 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: ERMANE G. ROBIN 11/10/2005

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: EUGENE, OSNI Name: ROBIN, ERMANE G

 Address:
 7921 N E 2ND AVE.
 Address:
 505 NE 125TH STREET

 City-St-Zip:
 MIAMI, FL 33138
 City-St-Zip:
 MIAMI, FL 33161

Title: D () Delete Title: D (X) Change () Addition

 Name:
 ROBIN, ERMANE
 Name:
 EUGENE, OSNI

 Address:
 7921 N E 2ND AVE.
 Address:
 505 NE 125TH STREET

 City-St-Zip:
 MIAMI, FL 33138
 City-St-Zip:
 MIAMI, FL 33161

Title: D () Delete Title: D (X) Change () Addition Name: JOSEPH, MARC ANTOINE Name: JOSEPH, MARC ANTOINE

Address: 7921 N E 2ND AVE. Address: 505 NE 125TH STREET

City-St-Zip: MIAMI, FL 33138 City-St-Zip: MIAMI, FL 33161

Title: D () Delete Title: D (X) Change () Addition

 Name:
 DOLE, MARIE
 Name:
 DOLE, MARIE

 Address:
 7921 N E 2ND AVE.
 Address:
 505 NE 125TH STREET

 City-St-Zip:
 MIAMI, FL 33138
 City-St-Zip:
 MIAMI, FL 33161

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: ERMANE G. ROBIN P 11/10/2005