

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000070712

FILED  
Nov 28, 2007  
Secretary of State

Entity Name: POSITIVE BEAUTY IMAGES MAGAZINE, INC.

## Current Principal Place of Business:

1601 N. PALM AVENUE  
STE 311E  
PEMBROKE PINES, FL 33026

## New Principal Place of Business:

## Current Mailing Address:

1601 N. PALM AVENUE  
STE 311E  
PEMBROKE PINES, FL 33026

## New Mailing Address:

6115 MIRAMAR PKWY  
STE E  
MIRAMAR, FL 33023

FEI Number: 37-1469820

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNSON-AUDAIN, DEBRA E  
6115 MIRAMAR PKWY  
STE E  
MIRAMAR, FL 33023 US

## Name and Address of New Registered Agent:

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: DEBRA E JOHNSON-AUDAIN

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: PRES ( ) Delete  
Name: JOHNSON-AUDAIN, DEBRA E  
Address: 5274 NW 186 LANE  
City-St-Zip: MIAMI, FL 33055

Title: VP (X) Delete  
Name: AUDAIN, COURTLAND W  
Address: 5274 NW 186 LANE  
City-St-Zip: MIAMI, FL 33055

Title: VP ( ) Delete  
Name: JOHNSON, MARCELLUS  
Address: 5274 NW 186 LANE  
City-St-Zip: MIAMI, FL 33055

Title: TR ( ) Delete  
Name: JOHNSON, SHIRLEY F  
Address: 20168 NW 38 PLACE  
City-St-Zip: MIAMI, FL 33055

## 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:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DEBRA E. JOHNSON-AUDAIN

PRES

11/28/2007

Electronic Signature of Signing Officer or Director

Date