

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000075592

FILED
Nov 09, 2006
Secretary of State

Entity Name: HEAVEN SENT DAYCARE OF BRANDON, INC.

Current Principal Place of Business:

3003 SOUTH KINGS AVE
BRANDPM, FL 33511

New Principal Place of Business:

3003 SOUTH KINGS AVE
BRANDON, FL 33511

Current Mailing Address:

3003 SOUTH KINGS AVE
BRANDPM, FL 33511

New Mailing Address:

3003 SOUTH KINGS AVE
BRANDON, FL 33511

FEI Number: 20-0116781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, DIANA
3003 S RINGS AVE
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

COHEN, DIANA
3003 S KINGS AVE
BRANDON, FL 33511 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: DIANA COHEN

11/09/2006

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: COHEN, DIANA
Address: 3003 SOUTH KINGS AVE
City-St-Zip: BRANDON, FL 33511

Title: P () Delete
Name: COHEN, JOSE
Address: 3003 SOUTH KINGS AVE
City-St-Zip: BRANDON, FL 33511

Title: VP () Delete
Name: COHEN, TAISHA
Address: 3003 SOUTH KINGS AVE
City-St-Zip: BRANDON, FL 33511

Title: ST () Delete
Name: COHEN, JOSHUA
Address: 3003 SOUTH KINGS AVE
City-St-Zip: BRANDON, FL 33511

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 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: DIANA COHEN

D

11/09/2006

Electronic Signature of Signing Officer or Director

Date