## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000077519

Entity Name: HEAVENLY CARE SERVICES INC.

FILED May 22, 2007 Secretary of State

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

6497 SUNSET STRIP 7377 NW 49 PLACE SUNRISE, FL 33313 LAUDERHILL, FL 33319

Current Mailing Address: New Mailing Address:

6497 SUNSET STRIP 7377 NW 49 PLACE SUNRISE, FL 33313 LAUDERHILL, FL 33319

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BUISSERETH, PATRINA E 2460B NORTH STATE RD 7 LAUDERDALE LAKES, FL 33313 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: PATRINA BUISSERETH

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: ( ) Delete Title: (X) Change ( ) Addition BUISSERETH, PATRINA E BUISSERETH, PATRINA E Name: Name: 2460 NORTH STATE ROAD 7 #B-1 7377 NW 49 PLACE Address: Address: City-St-Zip: LAUDERDALE LAKES, FL 33313 City-St-Zip: LAUDERHILL, FL 33319

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

 Name:
 JONES-LIGHTBOURN, JOAN
 Name:

 Address:
 6497 SUNSET STRIP
 Address:

 City-St-Zip:
 SUNRISE, FL 33313 US
 City-St-Zip:

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

 Name:
 COX'CURRY, CHERYL
 Name:

 Address:
 6497 SUNSET STRIP
 Address:

 City-St-Zip:
 SUNRISE, FL 33313
 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: PATRINA BUISSERETH P 05/22/2007