## 2004 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000133668

FILED Oct 27, 2004 Secretary of State

Entity Nar	me: RHODEN LUXURY CARE, INC.			
Current Principal Place of Business:		New Principal Place	of Business:	
890 NW 12 CORAL SF	27TH AVE. PRINGS, FL 33071			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
890 NW 12 CORAL SE	27TH AVE. PRINGS, FL 33071			
FEI Number:	FEI Number Applied For (X	() FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and	Address of Current Registered Agen	t: Name and Address o	f New Registered Agent:	
3551 NW 9 SUNRISE, The above	PHILBERT 95TH TERR., #353 FL 33351 US named entity submits this statement for e of Florida.	the purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:			
	Electronic Signature of Registered	d Agent	Date	
Election Car	ce with s. 607.193(2)(b), F.S., the corporation npaign Financing Trust Fund Contribution ( )			
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGE	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () Delete RHODEN, CARLTON 890 NW 127TH AVE. CORAL SPRINGS, FL 33071	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD () Delete RHODEN, LANA 890 NW 127TH AVE. CORAL SPRINGS, FL 33071	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: CARLTON A. RHODEN DP 10/27/2004