2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P0400000039

Entity Name: BETIM CORPORATION

FILED Jul 22, 2008 Secretary of State

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

22319 GENERAL STREET 391 SW FIG AVENUE

BOCA RATON, FL 33428 FL PORT SAINT LUCIE, FL 34953 FL

Current Mailing Address: New Mailing Address:

22319 GENERAL STREET 391 SW FIG AVENUE

BOCA RATON, FL 33428 FL PORT SAINT LUCIE, FL 34953 FL

FEI Number: 20-0536823 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:

TAX HOUSE CORPORATION
1261 E SAMPLE RD.
TAX HOUSE CORPORATION
1100 S FEDERAL HWY

POMPANO BEACH, FL 33064 US DEERFIELD BEACH, FL 33441 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: TAX HOUSE CORPORATION 07/22/2008

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: PD () Delete Title: PD (X) Change () Addition Name: ALEXANDER, SANDRA S Name: ALEXANDER, SANDRA S

 Address:
 22319 GENERAL STREET
 Address:
 391 SW FIG AVENUE

 City-St-Zip:
 BOCA RATON, FL 33428
 City-St-Zip:
 PORT SAINT LUCIE, FL 34953

Title: VD () Delete Title: VD (X) Change () Addition Name: DA SILVA, ELIANDRO C Name: DA SILVA, ELIANDRO C

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

 Name:
 SILVA, DAVI C
 Name:
 SILVA, DAVI C

 Address:
 22319 GENERAL STREET
 Address:
 391 SW FIG AVENUE

 City-St-Zip:
 BOCA RATON, FL 33428
 City-St-Zip:
 PORT SAINT LUCIE, FL 34953

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: ELIANDRO C DA SILVA VD 07/22/2008