

2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000012456

FILED
Jan 07, 2011
Secretary of State

Entity Name: ALEPHZAYN HEALTH SERVICES, INC

Current Principal Place of Business:

7360 W 20 AVE #136
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

7360 W 20 AVE #136
HIALEAH, FL 33016

New Mailing Address:

FEI Number: 20-1618557

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILIAN, ZEOLIDA
7360 W 20 AVE #136
HIALEAH, FL 33016 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: ZEOLIDA MILIAN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MILIAN, ZEOLIDA
Address: 7360 W 20 AVE #139
City-St-Zip: HIALEAH, FL 33016

I hereby 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 all other like empowered.

SIGNATURE: ZEOLIDA MILIAN

Electronic Signature of Signing Officer or Director

MSS

01/07/2011

Date