2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 02, 2008
Secretary of State

DOCUMENT# P04000148048

Entity Name: BIBLICAL HEALTH INSTITUTE, INC.

Current Principal Place of Business:

5500 VILLAGE BLVD
SUITE 200
WEST PALM BEACH, FL 33407

New Principal Place of Business:

5500 VILLAGE BLVD
SUITE 202
WEST PALM BEACH, FL 33407

Current Mailing Address:

5500 VILLAGE BLVD
SUITE 200
WEST PALM BEACH, FL 33407

New Mailing Address:

5500 VILLAGE BLVD
SUITE 202
WEST PALM BEACH, FL 33407

FEI Number: 20-1826851 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROPPOLO, ELLSWORTH P.A.
404 WASHINGTON AVENUE
SUITE 750
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

BRAMS, JEFFREY B ESQ
5500 VILLAGE BLVD
SUITE 202
WEST PALM BEACH, FL 33407 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: JEFFREY B. BRAMS, ESQ. 10/02/2008
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:

Title: D ( ) Delete
Name: RUBIN, JORDAN S
Address: 5500 VILLAGE BLVD, SUITE 200
City-St-Zip: WEST PALM BEACH, FL 33407

Title: S (X) Delete
Name: DEWBERRY, JASON B
Address: 5500 VILLAGE BLVD, SUITE 200
City-St-Zip: WEST PALM BEACH, FL 33407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: JORDAN S. RUBIN D 10/02/2008
Electronic Signature of Signing Officer or Director Date