2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 05, 2008
Secretary of State

DOCUMENT# P04000169691

Entity Name: PROFESSIONALS THAT CARE, INC.

Current Principal Place of Business:

PO BOX 20143
WEST PALM BEACH, FL 33406

New Principal Place of Business:

1221 SW 143RD AVE
MIAMI, FL 33184

Current Mailing Address:

PO BOX 20143
WEST PALM BEACH, FL 33406

New Mailing Address:

FEI Number: 20-2193547 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KAUFMAN, MICHAEL A ESQ
1601 FORUM PLACE, SUITE 404
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

HOXTER, VILMA
1221 SW 143RD AVE
MIAMI, FL 33184 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: VILMA HOXTER 04/05/2008
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: TOBIA, GERRI
Address: 721 5TH AVENUE, TRUMP TOWER - APT. 47D
City-St-Zip: NEW YORK, NY 10022

Title: DPS (X) Delete
Name: HOXTER, VILMA
Address: PO BOX 20143
City-St-Zip: WEST PALM BEACH, FL 33406

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: HOXTER, VILMA
Address: P O BOX 20143
City-St-Zip: WEST PALM BEACH, FL 33406

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: VILMA HOXTER DP 04/05/2008
Electronic Signature of Signing Officer or Director Date