

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000017324

Entity Name: BODY ACTIVE INC.

FILED  
Nov 17, 2009  
Secretary of State

**Current Principal Place of Business:**

3792 NW 13 STREET  
MIAMI, FL 33126

**New Principal Place of Business:**

**Current Mailing Address:**

3792 NW 13 STREET  
MIAMI, FL 33126

**New Mailing Address:**

FEI Number: 20-2483345

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TORRENS, JOANNA M  
3792 NW 13 STREET  
MIAMI, FL 33126 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: JOANNA M TORRENS

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: P ( ) Delete  
Name: TORRENS, JOANNA M  
Address: 3792 NW 13 STREET  
City-St-Zip: MIAMI, FL 33126

Title: VP ( ) Delete  
Name: TORRENS, JAIME G  
Address: 9775 SW 15 STREET  
City-St-Zip: MIAMI, FL 33174

Title: VP ( ) Delete  
Name: TORRENS, ZENaida R  
Address: 9775 SW 15 STREET  
City-St-Zip: MIAMI, FL 33174

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JAIME G TORRENS

VP

11/17/2009

Electronic Signature of Signing Officer or Director

Date