2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000157995

Entity Name: BEATRICE AND ASSOCIATES, INC

FILED Oct 17, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1270 NW 168 AVENUE PEMBROKE PINES, FL 33028

Current Mailing Address: New Mailing Address:

1270 NW 168 AVENUE PEMBROKE PINES, FL 33028

FEI Number: 33-1129727 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

HARRISON, TREVOR 1270 NW 168 AVENUE PEMBROKE PINES, FL 33028 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: TREVOR HARRISON

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: D () Delete Title: P (X) Change () Addition Name: HARRISON, TREVOR Name: HARRISON, TREVOR

 Name:
 HARRISON, TREVOR
 Name:
 HARRISON, TREVOR

 Address:
 1270 NW 168 AVENUE
 Address:
 1270 NW 168 AVENUE

 City-St-Zip:
 PEMBROKE PINES, FL 33028
 City-St-Zip:
 PEMBROKE PINES, FL 33028

Title: D () Delete Title: T (X) Change () Addition Name: HARRISON, BERNICE Name: HARRISON, BERNICE

Address: 1270 NW 168 AVENUE Address: 1270 NW 168 AVENUE City-St-Zip: PEMBROKE PINES, FL 33028 City-St-Zip: PEMBROKE PINES, FL 33028

Title: D () Delete Title: VP (X) Change () Addition

 Name:
 HARRISON, HOWARD
 Name:
 HARRISON, HOWARD

 Address:
 1270 NW 168 AVENUE
 Address:
 1270 NW 168 AVENUE

 City-St-Zip:
 PEMBROKE PINES, FL 33028
 City-St-Zip:
 PEMBROKE PINES, FL 33028

I hereby certify that the information supplied with this filing does not qualify for the 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: TREVOR HARRISON P 10/17/2006