

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000058542

Entity Name: NEW WAY OF LIFE, INC.

FILED
Nov 19, 2007
Secretary of State

Current Principal Place of Business:

8425 NW 8TH STREET SUITE 202
MIAMI, FL 33126

New Principal Place of Business:

8425 NW 8TH STREET
SUITE 202
MIAMI, FL 33126

Current Mailing Address:

8425 NW 8TH STREET SUITE 202
MIAMI, FL 33126

New Mailing Address:

8425 NW 8TH STREET
SUITE 202
MIAMI, FL 33126

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

Name and Address of Current Registered Agent:

OBREGON, CARLOS
8100 SW 19 STREET
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

TAVEINNI, LAWRAYE M
8425 NW 8TH STREET
SUITE 202
MIAMI, FL 33126 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: LAWRAYE TAVEINNI

11/19/2007

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: TAVENNI, LAWRAYE
Address: 8425 NW 8TH STREET SUITE 202
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LAWRAYE TAVEINNI

P

11/19/2007

Electronic Signature of Signing Officer or Director

Date