2010 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 01, 2010
Secretary of State

DOCUMENT# P06000091736

Entity Name: MAGESTIC CARE SOLUTIONS, INC.

Current Principal Place of Business:

5738 HORTON ROAD
PLANT CITY, FL 33567

New Principal Place of Business:

Current Mailing Address:

5738 HORTON ROAD
PLANT CITY, FL 33567

New Mailing Address:

FEI Number: 75-3219105 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHAKES, YVONNE E
5738 HORTON ROAD
PLANT CITY, FL 33567 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: YVONNE E SHAKES

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D
Name: SHAKES, YVONNE E
Address: 5738 HORTON ROAD
City-St-Zip: PLANT CITY, FL 33567

I hereby 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 all other like empowered.

SIGNATURE: YVONNE E SHAKES D 11/01/2010

Electronic Signature of Signing Officer or Director — Date