2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 08, 2009
Secretary of State

DOCUMENT# P06000105415

Entity Name: ECLARKE CLIENT CARE , CORP

Current Principal Place of Business:

1133 NW 46TH AVE
LAUDERHILL, FL 33313

New Principal Place of Business:

Current Mailing Address:

1133 NW 46TH AVE
LAUDERHILL, FL 33313

New Mailing Address:

FEI Number: 56-2603790 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLARKE, ETHLYN
1133 NW 46TH AVE
LAUDERHILL, FL 33313 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: ETHLYN CLARKE

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: CLARKE, ETHLYN
Address: 1133 NW 46TH AVE
City-St-Zip: LAUDERHILL, FL 33313

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: ETHLYN CLARKE PRES 12/08/2009

Electronic Signature of Signing Officer or Director Date