

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000119949

**FILED**  
**Feb 21, 2009**  
**Secretary of State**

**Entity Name:** PURE LIFE TREATMENT CENTER INCORPORATED

**Current Principal Place of Business:**

1601 WASHINGTON AVENUE  
MIAMI BEACH, FL 33139 US

**New Principal Place of Business:**

1601 WASHINGTON AVENUE  
112  
MIAMI BEACH, FL 33139 US

**Current Mailing Address:**

1250 SOUTH MIAMI AVENUE  
1206  
MIAMI, FL 33186 US

**New Mailing Address:**

1601 WASHINGTON AVENUE  
112  
MIAMI BEACH, FL 33139 US

**FEI Number:** 20-5588899

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

TORGERSEN, SIRI H  
1250 SOUTH MIAMI AVENUE  
1206  
MIAMI, FL 33130 US

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

MF CORPORATE SERVICES INTERNATIONAL  
999 PONCE DE LEON BOULEVARD  
SUITE PH 1135  
CORAL GABLES, FL 33134 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: OLGA SANTINI

02/21/2009

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: TORGERSEN, SIRI H  
Address: 1250 SOUTH MIAMI AVENUE, SUITE 1206  
City-St-Zip: MIAMI, FL 33130 US

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

Title: P (X) Change ( ) Addition  
Name: TORGERSEN, SIRI H  
Address: 1601 WASHINGTON AVENUE SUITE 112  
City-St-Zip: MIAMI BEACH, FL 33139 US

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: SIRI TORGERSEN

P

02/21/2009

Electronic Signature of Signing Officer or Director

Date