

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000048636

Entity Name: BELLA CARE PA

FILED
Oct 22, 2009
Secretary of State

Current Principal Place of Business:

500 S.E. 17TH STREET
#220
FORT LAUDERDALE, FL 33316 US

New Principal Place of Business:

Current Mailing Address:

6040 NW 68TH MANOR
PARKLAND, FL 33067 US

New Mailing Address:

FEI Number: 26-0140150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLUKIS, JEFFREY
5555 N. STATE RD. 7
CORAL SPRINGS, FL 33067 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: JEFFREY KLUKIS

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: PRES () Delete
Name: DO LAGO-KLUKIS, ISABEL D
Address: 500 S.E. 17TH STREET SUITE # 220
City-St-Zip: FORT LAUDERDALE, FL 33316 US

Title: TRES () Delete
Name: KLUKIS, JEFFREY
Address: 500 S.E. 17TH STREET SUITE # 220
City-St-Zip: FORT LAUDERDALE, FL 33316 US

Title: SECT () Delete
Name: DO LAGO-KLUKIS, ISABEL D
Address: 500 S.E. 17TH STREET SUITE # 220
City-St-Zip: FORT LAUDERDALE, FL 33316 US

Title: DIR () Delete
Name: DO LAGO-KLUKIS, ISABEL
Address: 500 S.E. 17TH STREET SUITE # 220
City-St-Zip: FORT LAUDERDALE, FL 33316 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JEFFREY KLUKIS

TRES

10/22/2009

Electronic Signature of Signing Officer or Director

Date