

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000120674

Entity Name: CARE TRUST FLORIDA, INC.

**FILED**  
**Nov 17, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

6355 NW 36 ST SUITE 401  
MIAMI, FL 33166

**New Principal Place of Business:**

9079 D SW 133CT  
MIAMI, FL 33186

**Current Mailing Address:**

6355 NW 36 ST SUITE 401  
MIAMI, FL 33166

**New Mailing Address:**

9079 D SW 133CT  
MIAMI, FL 33186

FEI Number: 66-0707616

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LUGO, CARLOS  
6355 NW 36 ST SUITE 401  
MIAMI, FL 33166 US

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

COBB, NANETTE  
9079 D SW 133CT  
MIAMI, FL 33186 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: NANETTE COBB

11/17/2008

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: COBB, LOUMARIE  
Address: 6355 NW 36 ST SUITE 401  
City-St-Zip: MIAMI, FL 33166

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

Title: P (X) Change ( ) Addition  
Name: COBB, LOUMARIE  
Address: 9079 D SW 133CT  
City-St-Zip: MIAMI, FL 33186

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: LOUMARIE COBB

P

11/17/2008

Electronic Signature of Signing Officer or Director

Date