2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000132804

Entity Name: ADVANCED NAIL GROWTH SYSTEMS, INC.

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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19501 W. COUNTRY CLUB DR., APT. 1508 18671 COLLINS AVENUE AVENTURA, FL 33180

#2704

SUNNY ISLES BEACH, FL 33160

Current Mailing Address: New Mailing Address:

19501 W. COUNTRY CLUB DR., APT. 1508 200 EAST 72 ST.

AVENTURA, FL 33180 #24N

NEW YORK, NY 10021

FEI Number: 56-2289218 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WOLF, JORDAN R WOLF, JORDAN R 19501 W. COUNTRY CLUB DR., APT. 1508 18671 COLLINS AVENUE

AVENTURA, FL 33180 US #2704

SUNNY ISLES BEACH, FL 33160 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: RYAN WOLF 04/20/2009

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete () Change () Addition

WOLF, JORDAN R Name: Name:

19501 W. COUNTRY CLUB DR., APT. 1508 Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip:

VD Title: Title: () Delete () Change () Addition

WOLF, RYAN Name: Name: 200 E. 72ND ST., APT. 24 N. Address: Address: NEW YORK, NY 10021 City-St-Zip: City-St-Zip:

Title: Title: STD () Delete STD (X) Change () Addition

WOLF, ERIN Name: WOLF, ERIN Name:

19433 38TH CT. 18671 COLLINS AVENUE Address: Address: City-St-Zip: SUNNY ISLES BCH, FL 33160 City-St-Zip: SUNNY ISLES BCH, FL 33160

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.

VΡ SIGNATURE: RYAN WOLF 04/20/2009