

2009 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 07, 2009
Secretary of State**

DOCUMENT# P08000048470

Entity Name: TWO SISTERS LOVE & CARE INC.

Current Principal Place of Business:

5456 NW 45 AVE.
MIAMI, FL 33126

New Principal Place of Business:

54-56 NW 45 AVE.
MIAMI, FL 33126

Current Mailing Address:

5456 NW 45 AVE.
MIAMI, FL 33126

New Mailing Address:

54-56 NW 45 AVE.
MIAMI, FL 33126

FEI Number: 26-0275355

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALONSO, MIRIAM
7601 SW 99 AVE.
MIAMI, FL 33126 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: MIRIAM ALONSO

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: ALONSO, MIRIAM
Address: 7601 SW 99 AVE.
City-St-Zip: MIAMI, FL 33173

Title: V () Delete
Name: ALVAREZ, IRAIDA
Address: 5456 NW 45 AVE.
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: ALVAREZ, IRAIDA
Address: 54-56 NW 45 AVE.
City-St-Zip: MIAMI, FL 33126

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: IRAIDA ALVAREZ

VP

10/07/2009

Electronic Signature of Signing Officer or Director

Date