

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000032218

**FILED**  
**Dec 13, 2011**  
**Secretary of State**

**Entity Name:** MIRACLES BARBER & BEAUTY ACADEMY INCORPORATED

**Current Principal Place of Business:**

10224 N.30TH. ST.  
TAMPA, FL 33612

**New Principal Place of Business:**

**Current Mailing Address:**

10224 N.30TH. ST.  
TAMPA, FL 33612

**New Mailing Address:**

**FEI Number:** 26-4679723

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCOTT, LAKIA C  
13410 PRESTWICK DR.  
RIVERVIEW, FL 33579 US

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

COLLINS, ERIC SR.  
9232 HIDDEN WATER PL.  
RIVERVIEW, FL 33578 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: ERIC COLLINS

12/13/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: WALKER, TYRONE C  
Address: 10224 N.30TH. ST.  
City-St-Zip: TAMPA, FL 33612 US

Title: V.P.  
Name: WALKER, MICHELLE E  
Address: 10224 N. 30TH. ST.  
City-St-Zip: TAMPA, FL 33612 US

Title: V.P.  
Name: SCOTT, LAKIA C  
Address: 10224 N. 30TH. ST.  
City-St-Zip: TAMPA, FL 33612 US

Title: SEC  
Name: COLLINS, CHERYL  
Address: 13015 TRIBUTE DR.  
City-St-Zip: RIVERVIEW, FL 33579 US

Title: TRES  
Name: JORDAN, SONJA  
Address: 13015 TRIBUTE DR.  
City-St-Zip: RIVERVIEW, FL 33579

I hereby 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 all other like empowered.

SIGNATURE: TYRONE WALKER

PRES

12/13/2011

Electronic Signature of Signing Officer or Director

Date