

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000048922

Entity Name: THE ALOE MAN SUPPLIES, INC.

FILED
Oct 07, 2005
Secretary of State

Current Principal Place of Business:

4090 NW 12TH STREET
LAUDERHILL, FL 33313

New Principal Place of Business:

Current Mailing Address:

4090 NW 12TH STREET
LAUDERHILL, FL 33313

New Mailing Address:

FEI Number: 65-0780904

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNES, ANNETTE
999 NW 20TH ST
FORT LAUDERDALE, FL 33311 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: ANNETTE BARNES

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: D () Delete
Name: BARNES, ANNETTE
Address: 999 NW 20TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D () Delete
Name: BROWN, FAY
Address: 139-89 177 AVENUE APT 1B
City-St-Zip: JAMAICA, NY

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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: ANNETTE BARNES

D

10/07/2005

Electronic Signature of Signing Officer or Director

Date