2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000053492

Entity Name: Y.B.S., INC.

FILED Oct 11, 2006 Secretary of State

Ourself Brigainal Black of Business			New Principal Place	4 Pusings	
Current Principal Place of Business:			New Principal Place of	or Business:	
2000 ISLAN	ID BLVD				
1908	N EL 22460				
AVENTURA	A, FL 33160				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
2000 ISLAN	ID BLVD				
1908					
AVENTURA	4, FL 33160				
FEI Number: (65-0927835	FEI Number Applied For () FEI	Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
GURT, COL 2000 ISLAN 1908 AVENTURA		S			
AVENTORA, TE 35100 00					
The above r in the State		bmits this statement for the purpos	se of changing its registered	office or registered agent, or both,	
SIGNATUR	E: COLETTE	GURT			
Electronic Signature of Registered Agent				Date	
		2)(b), F.S., the corporation did not recei Trust Fund Contribution ().	ve the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	PD ()D	Pelete	Title:	() Change () Addition	
Name:	GURT, COLETTE		Name:		
Address:	2000 ISLAND BLY		Address:		
City-St-Zip:	AVENTURA, FL 3	33160	City-St-Zip:		
Title:	VD ()D	Pelete	Title:	() Change () Addition	
Name:	GURT, BENJAMIN	N	Name:		
Address:	2000 ISLAND BLV		Address:		
City-St-Zip:	AVENTURA, FL 3	33160	City-St-Zip:		
Title:	SD ()D	Delete	Title:	() Change () Addition	
Name:	GURT, MAURICE		Name:		
Address:	2000 ISLAND BLY		Address:		
City-St-Zip:	AVENTURA, FL 3	33160	City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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: COLETTE GURT PD 10/11/2006