

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000010984

FILED
Jan 09, 2008
Secretary of State

Entity Name: TOTALLY BEADED, INC

Current Principal Place of Business:C/O ROBIN AGRONIN
13342 LAKEPOINT CIRCLE
COOPER CITY, FL 33330**New Principal Place of Business:****Current Mailing Address:**C/O ROBIN AGRONIN
13342 LAKEPOINT CIRCLE
COOPER CITY, FL 33330**New Mailing Address:**

FEI Number: 20-2324382

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:LIPPMAN, FREDRIK S
11712 S ISLAND RD
COOPER CITY, FL 33026 US**Name and Address of New Registered Agent:**LIPPMAN, FREDRIK S
13342 LAKEPOINT CIRCLE
COOPER CITY, FL 33330 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: FREDRIK S. LIPPMAN

01/09/2008

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: AGRONIN, ROBIN L
Address: 13342 LAKEPOINT CIRCLE
City-St-Zip: COOPER CITY, FL 33330Title: D () Delete
Name: LIPPMAN, MARLENE Z
Address: 11712 ISLAND ROAD
City-St-Zip: COOPER CITY, FL 33026**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: D (X) Change () Addition
Name: LIPPMAN, MARLENE Z
Address: 140B RIVER PARK DR, P O BOX 6343
City-St-Zip: BRECKENRIDGE, CO 80424

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: MARLENE LIPPMAN

D

01/09/2008

Electronic Signature of Signing Officer or Director_____
Date