# 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F06000000711

Entity Name: MIMI'S OPERA, INC

FILED Jan 18, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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6101 AQUA AVE 6101 AQUA AVE

#128 #302

MIAMI BEACH, FL 33141 MIAMI BEACH, FL 33141

Current Mailing Address: New Mailing Address:

6101 AQUA AVE 6101 AQUA AVE

#128 #302

MIAMI BEACH, FL 33141 MIAMI BEACH, FL 33141

FEI Number: 52-1592316 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:

LEVITAS, YETTA M 6101 AQUA AVE LEVITAS, YETTA M 6101 AQUA AVE

#128 #302

MIAMI BEACH, FL 33141 US MIAMI BEACH, FL 33141 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: YETTA M LEVITAS 01/18/2008

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:**

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP ( ) Delete Title: CP (X) Change ( ) Addition

 Name:
 LEVITAS, YETTA M
 Name:
 LEVITAS, YETTA M

 Address:
 6101 AQUA AVE #128
 Address:
 6101 AQUA AVE #302

 City-St-Zip:
 MIAMI BEACH, FL 33141
 City-St-Zip:
 MIAMI BEACH, FL 33141

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 TAIBEL, BASIL CPA
 Name:

 Address:
 9515 DEERECO ROAD, SUITE 801
 Address:

 City-St-Zip:
 TIMONIUM, MI 21093
 City-St-Zip:

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: BASIL TAIBEL MR 01/18/2008