2008 FOR PROFIT CORPORATION REINSTATEMENT

1. Entity Nan	MENT # F07000000 PPAREL, INC.	933			FILED 08 NOV 12 AM 9: 49
Principal Place of Business 8306 FOSTER DRIVE CHAMPIONS GATE, FL 33896		Mailing Address 8306 FOSTER DRIVE CHAMPIONS GATE, FL 33	896		SECRETARY OF STATE TALLAHASSEE, FLORIDA
2. Principal Place of Business - No P.O. Box # 321 TERMACE RIDGE CINDS Suite, Apt. #, etc.		3. Mailing Address 391 TERRACE RIDGE CIRCLE Suite, Apt. #, etc.		nclÉ	REINSTATEMENTO 8
DAUEN PORT PL		City & State DAUENPORT F			4. FEI Number Applied For 60-2578487 Not Applicable
2379	Country		Country		5. Certificate of Status Desired \$8.75 Additional Fee Required
	6. Name and Address of Current F			<u>-</u>	7. Name and Address of New Registered Agent
MONTEZERI, JOE 8306 FOSTER DRIVE CHAMPIONS GATE, FL 33896  Name HONTEZERI JOE Street Address (P.O. Box Number is Not Acceptable)					
321 75					PORT FL Zipcode Rd(
8. The above named entity submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Joe Montezeri PSTAVD VP 11-06-2008 Signature Signature of registered apert and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE					
FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10.	OFFICERS AND D		11.	Tell	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME	CD DEVOLDER, ANNICK	☐ Delete	TITLE NAME	UEN	DOLDER ANNICK Trange Addition
STREET ADDRESS CITY-ST-ZIP	8306 FOSTER DRIVE CHAMPIONS GATE, FL 33896		STREET ADDRESS City-St-zip	321	TERRACE RIDGE CIRCLE USN PORT FL 33806
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST MONTEZERI, JOE 8306 FOSTER DRIVE	☐ Delete	NAME STREET ADDRESS	PST MON 381	NTEZERI JOE RIDGE CIRCLE
TITLE	CHAMPIONS GATE, FL 33896 VP	□ Delete	CITY-ST-ZIP	JAC	UEN PORT FL 33896  Change Addition
NAME STREET ADDRESS CITY-ST-ZIP	MONTEZERI, JOE 8306 FOSTER DRIVE CHAMPIONS GATE, FL 33896	Li belete	NAME SIREET ADDRESS CITY-ST-ZIP	271	TERRACE RIDGE CIRCLE  UEN PORT PL 33896
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delate	TITLE NAME STREET ADDRESS CITY-ST-ZIP	UH	Change Addition 11/12/0801045008 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statules. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: DEUC DETERANTIK (D) 11 6 las 47-5134458					

DC11/14