

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F07000001980

Entity Name: E.T.C. WORKSHOP, INC.

**FILED**  
**Oct 06, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

303 WEST 42 ND STREET  
SUITE 505  
NEW YORK CITY, NY 10036

**New Principal Place of Business:**

**Current Mailing Address:**

20 WATERSIDE PLAZA  
35 G  
NEW YORK CITY, NY 10010

**New Mailing Address:**

FEI Number: 51-0164165

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CONTELLA, ROBERT  
555 NE 15 ST, SUITE 7730  
MIAMI, FL 33132 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: ROBERT CONTELLA

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: EXEC  
Name: CHLADEK, JAMES J  
Address: 20 WATERSIDE PLAZA #356  
City-St-Zip: NEW YORK, NY 10010

Title: MR  
Name: CHLADEK, OLIVIER  
Address: 303 WEST 42 ND STREET SUITE 505  
City-St-Zip: NEW YORK CITY, NY 10010

Title: D  
Name: CONTELLA, ROBERT  
Address: 555 NE 15, STREET SUITE 7730  
City-St-Zip: MIAMI, FL 33132

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES CHLADEK

EXEC

10/06/2011

Electronic Signature of Signing Officer or Director

Date