

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L97000000738

FILED
Sep 29, 2005
Secretary of State

Entity Name: FRENCH KISS, L.C.

Current Principal Place of Business:

17275 COLLIN'S AVE
303
NO MIAMI, FL 33160

New Principal Place of Business:

Current Mailing Address:

17275 COLLINS AVE., APT. #303
NO. MIAMI, FL 331603442

New Mailing Address:

C/O MOYAL ACCOUNTING SERVICES, INC
208 N. UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024

FEI Number: 65-0806534 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MOYAL, PATRICK
208 N. UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024 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: PATRICK MOYAL

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MAZOUZ, RONI
Address: 17275 COLLINS AVE
City-St-Zip: NO MIAMI, FL 33160

Title: MGR () Delete
Name: HATTAB, JACOB ERIC
Address: 17275 COLLINS AVE
City-St-Zip: NO MIAMI, FL 33160

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MAZOUZ, RONI
Address: 17275 COLLINS AVE
City-St-Zip: NO MIAMI, FL 33160

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RONI MAZOUZ

MGRM

09/29/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date