2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 29, 2004
Secretary of State

DOCUMENT# M43019

Entity Name: GOURMET CHANDLERY INCORPORATED

Current Principal Place of Business:

10591 NW 53 STREET
SUNRISE, FL 33351

New Principal Place of Business:

P.O. BOX 450221
SUNRISE, FL 33345

Current Mailing Address:

10591 NW 53 STREET
SUNRISE, FL 33351

New Mailing Address:

P.O. BOX 450221
SUNRISE, FL 33345

FEI Number: 59-2750406 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHEINER, NAOMI
9609 NW 9TH COURT
PLANTATION, FL 33324 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: _____

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: VD ( ) Delete
Name: SCHEINER, ERIC,
Address: 10591 NW 53 STREET
City-St-Zip: SUNRISE, FL

Title: PD ( ) Delete
Name: SCHEINER, NAOMI,
Address: 10591 NW 53 STREET
City-St-Zip: SUNRISE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition
Name: SCHEINER, ERIC,
Address: P.O. BOX 450221
City-St-Zip: SUNRISE, FL 33345

Title: PD (X) Change ( ) Addition
Name: SCHEINER, NAOMI,
Address: P.O. BOX 450221
City-St-Zip: SUNRISE, FL 33345

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 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: NAOMI SCHEINER PRES 10/29/2004

Electronic Signature of Signing Officer or Director Date