

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000008375

FILED
Nov 10, 2005
Secretary of State

Entity Name: CHICHIMA PRODUCTIONS, INC.

Current Principal Place of Business:

12 GRANGE PLACE
BOYNTON BEACH, FL 33426 US

New Principal Place of Business:

Current Mailing Address:

12 GRANGE PLACE
BOYNTON BEACH, FL 33426 US

New Mailing Address:

FEI Number: 20-3765981 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WOODS, SYLVIA
12 GRANGE PLACE
BOYNTON BEACH, FL 33426 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: SYLVIA WOODS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D,P () Delete
Name: GRANT, KIMM
Address: 644 SW 7TH STREET
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: D,S () Delete
Name: ROLLE, TINA
Address: 12 GRANGE PLACE
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: D () Delete
Name: WOODS, SYLVIA
Address: 12 GRANGE PLACE
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: D () Delete
Name: WOODS, JOSEPH
Address: 12 GRANGE PLACE
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: VP () Delete
Name: LEONARD, LAJUAN
Address: 12 GRANGE PLACE
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: T () Delete
Name: ROLLE, MONICA
Address: 12 GRANGE PLACE
City-St-Zip: BOYNTON BEACH, FL 33426 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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 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 an address, with all other like empowered.

SIGNATURE: SYLVIA WOODS

DIRE

11/10/2005

Electronic Signature of Signing Officer or Director

Date