## 2004 FOR PROFIT CORPORATION REINSTATEMENT

SIGNATURE:X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALINOTATEMENT									
DOCUMENT # P0000052203  1. Entity Name ART & DESIGN NEW STYLE INC.					FILED 04 NOV -8 AM 10: 49				
Principal Place of Business Mailing Address					(	SECRETARY	OF STAT	Έ	
<u>-4474 WESTON RD</u>						ALLAHASSE			
#120 #120 FORT LAUDERDALE, FL 33331- FORT LAUDERDALE, FL 33331-						######################################	 		
				ANE DR.					
Suite, Apt. #, etc. Suite, Apt. #, etc.					11032004	REIN-P	CR2E	098 (6/04)	
City & Stat	ESTON FL.	City & State STO	1, FL	•	4. FEI Numbe 65-101			<del></del>	plied For
Zip 33 8	327 Country SA	Zip 333327	Country レス	A	•	of Status Desired		\$8.75 Add Fee Required	litional
	6. Name and Address of Current F	Registered Agent	Name		7. Name and	Address of New	Registered A	gent	
LACRUZ, RICARDO -4474 WESTON RD:				Street Address (P.O. Box Number is Not Acceptable)					
-#120	22224 2405.	G-7	907 GOLDEN CANE DR						
<del></del>		90/	60		<u> HANS</u>		7:- 0-4		
			City	<u> 3 M</u>	51 ON	·	FL	Zip Code	2224
8. 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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE									
Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE									
FILE NOW!!! FEE IS \$150.00 After January 1, 2005, Fee will be \$300.00				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10.	OFFICERS AND I	DIRECTORS	11,		ADDITIONS	CHANGES TO OF	FICERS AND	DIRECTORS	S IN 11
TITLE	<del>P.</del> .	☐ Delete	TITLE	P	or Did	E LOR	DA.	Change	☐ Addition
NAME OTREET ADDRESS	LACRUZ, RICARDO	•	NAME	GE	HLDIN	ENER	られ ロ	<b>Z</b> .	
STREET ADDRESS CITY-ST-ZIP	-4474 WESTON ROAD #120  -FORT LAUDERDALE, FL-33331		STREET ADDRESS CITY-ST-ZIP	17.5	7 50 00 4 °	F4. 33	327		
TITLE	+	☐ Delete	TITLE		$\frac{2}{1}$	<u>ر د. ۱۳۰</u>		Change	☐ Addition
NAME	JORRO, GERALDINE	□ Delete	NAME	RIE	ARDA	, LACRI	JZ.		MODITION
STREET ADDRESS	-4474 WESTON ROAD #120		STREET ADDRESS	1793	17 Gol	DEN E	ANE	DK,	•
CITY-ST-ZIP	-FORT LAUDERDALE, FL-33334		CITY-ST-ZIP ·	W	<u> 570</u>	<u>N, FL.</u>	333	٨, / ،	
TITLE		☐ Delete	TITLE		-			Change	Addition
NAME STREET ADDRESS	,		NAME Street Address		70	Q2425 42055	5850	)7. <u> </u>	
CITY-ST-ZIP			CITY-ST-ZIP		117087	U4U1U5U-	-UU/ *	*158.75	
TITLE		☐ Delete	THTLE		/			Change	Addition
NAME			NAME						
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	1.0	11/15				
TITLE		☐ Delete	TITLE	<del>  \</del>	11112			Change	Addition
NAME		Delete .	NAME .	1 (1)	•*·	••	•	☐ Change	☐ Augusti
STREET ADDRESS			STREET ADDRESS	1	)	· · · · · · · · ·			
CITY-ST-ZIP			CITY-ST-ZIP		i		1 .		
TITLE		Delete -	TITLE		· New World	•		Change	☐ Addition
NAME STREET ADDRESS	e manding street has a con-	** - * * **	NAME Street adoress	'		•		• • .	•
CITY-ST-ZIP			CITY-ST-ZIP						
12.   hereby	certify that the information supplied with	this filing does not qualify for th	ne exemption sta	ated in Se	ction 119.07(3)	i). Florida Statutes	. I further cer	tify that the ir	nformation
of the co	I on this report or supplemental report is rporation or the receiver or trustee empo	wered to execute this report as	signature shall to required by Ch	nave the s apter 607	ame legal effec , Florida Statute	ot as it made under es; and that my nar	roath; that I a ne appears in	m an officer 1 Block 10 or	or director Block 11 if