2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000089316

Entity Name: NEW MILLENNIUM MAGIC WORK, INC.

FILED Oct 17, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5629 RODMAN ST UNIT BAY 4 HOLLYWOOD, FL 33023

Current Mailing Address: New Mailing Address:

5629 RODMAN ST UNIT BAY 4 6550 GRANT STREET HOLLYWOOD, FL 33023 HOLLYWOOD, FL 33024

FEI Number: 65-1042952 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NOFIL, JOSEPH P.A. 3284 NORTH STATE ROAD 7 LAUDERDALE LAKES, FL 33319 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: JOSEPH K NOFIL

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 BRAVO, RAMON HORACIO
 Name:
 BRAVO, RAMON HORACIO

 Address:
 5638 FUNSTON STREET, BAY 8
 Address:
 6550 GRANT STREET

 City-St-Zip:
 HOLLYWOOD, FL 33023
 City-St-Zip:
 HOLLYWOOD, FL 33024

Title: O () Delete Title: O (X) Change () Addition

 Name:
 BRAVO, ROXANNA
 Name:
 BRAVO, ROXANNA

 Address:
 5638 FUNSTON ST BAY 8
 Address:
 6550 GRANT STREET

 City-St-Zip:
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Title: O () Delete Title: O (X) Change () Addition

 Name:
 GODOY, SERGIO D
 Name:
 GODOY, SERGIO D

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 City-St-Zip:
 HOLLYWOOD, FL 33024

Title: O () Delete Title: O (X) Change () Addition

 Name:
 GODOY, BALTAZAR
 Name:
 GODOY, BALTAZAR

 Address:
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 City-St-Zip:
 HOLLYWOOD, FL 33024

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: RAMON BRAVO PRES 10/17/2006