2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000034637

1. Entity Name
PLAZA VENDOME, INC.

FILED
07 JUN 28 PM 3:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
501 BRICKELL KEY DRIVE SUITE 402 MIAMI, FL 33131	501 BRICKELL KEY DRIVE SUITE 402 MIAMI, FL 33131

06012007 REINCP CR2E098 (1/02) REINSTATEMENT 06-07

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
520 BRICKELL KEY DRIVE	520 BRICKELL KEY DRIVE
Suite, Apt. #, etc.: SUITE 509	Suite, Apt. #, etc.: SUITE 509
City & State: MIAMI FL	City & State: MIAMI FL
Zip: 33131 Country: USA	Zip: 33131 Country: USA

4. FEI Number: 33-0101532 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DOUMET, ROBERTO E 501 BRICKELL KEY DRIVE SUITE 402 MIAMI, FL 33131	Name: DOUMET, ROBERTO E. Street Address (P.O. Box Number is Not Acceptable): 520 BRICKELL KEY DRIVE SUITE 509 City: MIAMI FL Zip Code: 33131

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 $300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DOUMET, ROBERTO E 520 BRICKELL KEY DRIVE, SUITE 402 MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 520 BRICKELL KEY DRIVE, STE. 520
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DOUMET, OLGA E 520 BRICKELL KEY DRIVE, STE 402 MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 520 BRICKELL KEY DRIVE, STE 520
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DOUMET, ROBERTO E 520 BRICKELL KEY DRIVE, STE 402 MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 520 BRICKELL KEY DRIVE, STE 520
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 100104984411 06/28/07--01045--004 **300.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #