2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000084851

FILED Nov 04, 2005 Secretary of State

Entity Nar	ne: LIVING W	ITH ART INC.					
Current Principal Place of Business:				New Principal Place of Business:			
947 NW 31ST AVE POMPANO BEACH, FL 33069				4050 NW 9 AVENUE OAKLAND PARK, FL 33309			
Current Mailing Address:				New Mailing Address:			
6373-4 BAY CLUB DRIVE FORT LAUDERDALE, FL 33308				1041 SE 7 AVENUE POMPANO BEACH, FL 33060			
FEI Number:	05-0525412	FEI Number Applied For ()	FEI Number Not Ap	oplicable ()	Certificate of Status Des	ired()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
MASSO, ALFREDO J MR 6373-4 BAY CLUB DRIVE FORT LAUDERDALE, FL 33308 US				MASSO, ALFREDO J MR 4050 NW 9 AVENUE OAKLAND PARK, FL 33309 US			
	named entity s of Florida.	submits this statement for the	purpose of changing	g its registered o	ffice or registered ager	nt, or both,	
SIGNATUR	RE: ALFREDO	MASSO			11/04/2005		
	Electron	ic Signature of Registered Ag	ent		Date		
		3(2)(b), F.S., the corporation did n Trust Fund Contribution ().	ot receive the prior no	tice.			
OFFICERS	S AND DIREC	TORS:	ADDITIO	ONS/CHANGES	TO OFFICERS AND I	DIRECTORS:	
Title: Name: Address: City-St-Zip:	٠,		Title: Name: Address: City-St-Zip	` ') Change ()Addition		
Title: Name: Address: City-St-Zip:	MASSO, ALFRE 6373-4 BAY CL		Title: Name: Address: City-St-Zip	MASSO, ALFRI 1041 SE 7 AVE			
Title: Name: Address: City-St-Zip:	MASSO, ALFRE 6373-4 BAY CL		Title: Name: Address: City-St-Zip	MASSO, ALFRI 1041 SE 7 AVE			
Title:	T ()	Delete	Title:	()) Change () Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ALFREDO MASSO VΡ 11/04/2005

BRINKERHOFF, GEORGE H MR

COCONUT CREEK, FL 33073

4946 NW 52ND AVENUE

Name:

Address:

City-St-Zip: