2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 14, 2005
Secretary of State

DOCUMENT# P02000114998

Entity Name: LILIMPORTS, INC.

Current Principal Place of Business:

5605 N.W. 109 AVENUE #67
MIAMI, FL 33178

New Principal Place of Business:

8534 NW 66 STREET
DORAL, FL 33166

Current Mailing Address:

5605 N.W. 109 AVENUE #67
MIAMI, FL 33178

New Mailing Address:

8534 NW 66 STREET
DORAL, FL 33166

FEI Number: 45-0489794 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SABIN, LILIANA
5605 N.W. 109 AVENUE #67
MIAMI, FL 33178 US

Name and Address of New Registered Agent:

SABIN, LILIANA
8534 NW 66 STREET
DORAL, FL 33166 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: LILIANA SABIN 10/14/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SABIN, LILIANA
Address: 5605 N.W. 109 AVENUE #67
City-St-Zip: MIAMI, FL 33178

Title: VD ( ) Delete
Name: TARDIN, MARCIA E
Address: 5605 N.W. 109 AVENUE #67
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SABIN, LILIANA M
Address: 8534 NW 66 STREET
City-St-Zip: DORAL, FL 33166

Title: VD (X) Change ( ) Addition
Name: TARDIN, MARCIA E
Address: 8534 NW 66 STREET
City-St-Zip: DORAL, FL 33166

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.

SIGNATURE: LILIANA SABIN PD 10/14/2005
Electronic Signature of Signing Officer or Director Date