

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000119096

Entity Name: IVORY ENTERPRISE, INC.

FILED
Nov 16, 2004
Secretary of State

Current Principal Place of Business:

P.O. BOX 540612
OPA LOCKA, FL 33054

New Principal Place of Business:

4701 SW 45TH STREET
DAVIE, FL 33314

Current Mailing Address:

P.O. BOX 540612
OPA LOCKA, FL 33054

New Mailing Address:

3500 N STATE RD 7
SUITE 101
FT LAUD, FL 33319

FEI Number: 30-0131373

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IVORY, LISA
17531 NW 32ND AVENUE
MIAMI, FL 33056 US

Name and Address of New Registered Agent:

IVORY, LISA
3500 N STATE RD 7
SUITE 101
FT LAUD, 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: LISA IVORY

11/16/2004

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:

Title: PCEO () Delete
Name: IVORY, LISA
Address: 17531 NW 32ND AVENUE
City-St-Zip: MIAMI, FL 33056

Title: D (X) Delete
Name: IVORY, LISA
Address: 17531 NW 32ND AVENUE
City-St-Zip: MIAMI, FL 33056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: IVORY, LISA
Address: 3500 N STATE RD 7
City-St-Zip: FT LAUD, FL 33319

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LISA IVORY

P

11/16/2004

Electronic Signature of Signing Officer or Director

Date