

# **2007 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P03000017938

Entity Name: ILIE LAZAR, INC.

**FILED**  
**Aug 10, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

1801 S OCEAN DRIVE #841  
HALLANDALE BEACH, FL 33009

**New Principal Place of Business:**

1833 S OCEAN DR #1209  
HALLANDALE, FL 33009

**Current Mailing Address:**

1801 S OCEAN DRIVE 841  
HALLANDALE BEACH, FL 33009

**New Mailing Address:**

1833 S OCEAN DR #1209  
HALLANDALE, FL 33009

FEI Number: 32-5001414

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAZAR, ILIE  
1801 S.OCEAN DRIVE - #841  
HALLANDALE BEACH, FL 33009 US

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

LAZAR, ILIE  
1833 S.OCEAN DRIVE - #1209  
HALLANDALE BEACH, FL 33009 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: ILIE LAZAR

08/10/2007

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: D ( ) Delete  
Name: LAZAR, ILIE  
Address: 1801 S OCEAN DRIVE #841  
City-St-Zip: HALLANDALE BEACH, FL 33009

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: LAZAR, ILIE  
Address: 1833 S OCEAN DRIVE #1209  
City-St-Zip: HALLANDALE, FL 33009

I hereby certify that the information supplied with this filing does not qualify 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: ILIE LAZAR

P

08/10/2007

Electronic Signature of Signing Officer or Director

Date