

2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED

05 JUN 24 AM 11:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
REINSTATEMENT

04-5



06012005 REIN-P T. Roberts JUN 27 2005
CR2E098 (6/04)

DOCUMENT # P03000033350

1. Entity Name
BRANDYS ELEGANCE, INC.



Principal Place of Business
113 NORTH FEDERAL HWY
DANIA BEACH, FL 33334

Mailing Address
113 NORTH FEDERAL HWY
DANIA BEACH, FL 33004

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip

4. FEI Number
38-3692196

Applied For
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
ADAMS, GERALD
113 NORTH FEDERAL HWY
DANIA BEACH, FL 33334

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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 _____ (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	PVST MCKINNON, BRANDY 6538 COLLINS AVENUE, SUITE 243 MIAMI BEACH, FL 33414 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify 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 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: BRANDY MCKINNON -30-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #