2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000036434

Entity Name: MEALS & GIFT CREATIONS, INC.

FILED Oct 03, 2006 Secretary of State

•		·· - ·· , ·· - · · · · · · · · · · · · ·			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	AFTHORSE L TON, FL 334°				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	AFTHORSE L TON, FL 334°				
FEI Number:	: 06-1687874	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	IONICA AFTHORSE L TON, FL 3341				
	named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE: MONICA	CLARK			
	Electro	nic Signature of Registered A	gent	Date	
		93(2)(b), F.S., the corporation did ng Trust Fund Contribution ().	not receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	MS. (CLARK, MONII 14983 DRAFTI WELLINGTON	HORSE LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	O (> CLARK, DAVIE 14983 DRAFT WELLINGTON	HORSE LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: MONICA CLARK MS. 10/03/2006