

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000072245

FILED  
Oct 13, 2004  
Secretary of State

Entity Name: LIPSTICK MODEL & TALENT AGENCY INC.

## Current Principal Place of Business:

1521 ALTON RD, STE 410  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

## Current Mailing Address:

1521 ALTON RD, STE 410  
MIAMI BEACH, FL 33139

## New Mailing Address:

C/O ATER REGISTERED AGENTS, LLC  
2601 SOUTH BAYSHORE DRIVE, #600  
COCONUT GROVE, FL 33133

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HENRY, SUE A  
1521 ALTON RD, STE 410  
MIAMI BEACH, FL 33139 US

## Name and Address of New Registered Agent:

ATER REGISTERED AGENTS, LLC  
2601 SOUTH BAYSHORE DRIVE  
SUITE 600  
COCONUT GROVE, FL 33133 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: SANTIAGO ELJAEK, MANAGER

10/13/2004

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: P ( ) Delete  
Name: SAMUELS, MICHAEL  
Address: 1521 ALTON RD, STE 410  
City-St-Zip: MIAMI BEACH, FL 33139

Title: ST ( ) Delete  
Name: HENRY, SUE ANN  
Address: 1521 ALTON RD, STE 410  
City-St-Zip: MIAMI BEACH, FL 33139

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MICHAEL SAMUELS

P

10/13/2004

Electronic Signature of Signing Officer or Director

Date