

# **2004 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P03000104322

Entity Name: LUZ'S ULTIME DESIGN, INC.

**FILED**  
**Oct 21, 2004**  
**Secretary of State**

**Current Principal Place of Business:**

1843 NE MIAMI GARDENS DR  
N MIAMI BCH, FL 33179

**New Principal Place of Business:**

**Current Mailing Address:**

1843 NE MIAMI GARDENS DR  
N MIAMI BCH, FL 33179

**New Mailing Address:**

FEI Number: 04-3775488

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MELAND, MARK S ESQ.  
MELAND RUSSIN, HELLINGER & BUDWICK, P.A.  
200 S BISCAYNE BLVD  
MIAMI, FL 33131 US

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

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: \_\_\_\_\_

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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: SEC ( ) Change (X) Addition  
Name: BRODSKY, LUCENIS  
Address: 1843 NE 183RD ST  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

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: LUCENIS BRODSKY

SEC

10/21/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date