

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P03000121139

**FILED**  
**Jun 28, 2012**  
**Secretary of State**

**Entity Name:** TWINKLES OF BAY HARBOR INC.

**Current Principal Place of Business:**

1033 KANE CONCOURSE  
BAY HARBOR ISLANDS, FL 33154 US

**New Principal Place of Business:**

**Current Mailing Address:**

1033 KANE CONCOURSE  
BAY HARBOR ISLANDS, FL 33154 US

**New Mailing Address:**

**FEI Number:** 52-2421940

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JONATHAN D. LEINWAND, P.A.  
17501 BISCAYNE BLVD  
SUITE 430  
AVENTURA, FL 33160 US

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

JONATHAN D. LEINWAND, P.A.  
200 SOUTH ANDREWS AVENUE  
SUITE 703B  
FT. LAUDERDALE, FL 33301 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: JONATHAN LEINWAND

06/28/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: COHEN, ALISON  
Address: 211 BAL BAY DRIVE  
City-St-Zip: BAL HARBOUR, FL 33154 US

Title: S/T  
Name: WITTELS, LISHKA  
Address: 1033 KANE CONCOURSE  
City-St-Zip: BAY HARBOR ISLANDS, FL 33154 US

I hereby 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 all other like empowered.

SIGNATURE: ALISON COHEN

P

06/28/2012

Electronic Signature of Signing Officer or Director

Date