2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000016162

Entity Name: WELLINGTON ORCHIDS & GARDEN TREASURES, INC.

FILED Nov 22, 2005 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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 14728 96 LANE NORTH
 15668 NORTHLAKE BLVD

 W PALM BCH, FL 33412
 W PALM BCH, FL 33412

Current Mailing Address: New Mailing Address:

14728 96 LANE NORTH 15668 NORTHLAKE BLVD W PALM BCH, FL 33412 W PALM BCH, FL 33412

FEI Number: 83-0383821 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

WELLINGTON, SAMANTHA
14728 96 LANE NORTH
W PALM BCH, FL 33412 US

WELLINGTON, SAMANTHA
15668 NORTHLAKE BLVD
W PALM BCH, FL 33412 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: SAMANTHA WELLINGTON 11/22/2005

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition WELLINGTON, SAMANTHA WELLINGTON, SAMANTHA Name: Name: 14728 96 LANE NORTH Address: 15668 NORTHLAKE BLVD Address: City-St-Zip: W PALM BCH, FL 33412 City-St-Zip: W PALM BCH, FL 33412

Title: D () Delete Title: () Change () Addition

 Name:
 LOPATO, HAROLD
 Name:

 Address:
 3170 S OCEAN BLVD #S-306
 Address:

 City-St-Zip:
 PALM BEACH, FL 33480
 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: SAMANTHA WELLINGTON DIRE 11/22/2005