## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000047408

6117 NW 72 AVE.

MIAMI, FL 33166 US

Address: City-St-Zip: FILED Sep 26, 2006 Secretary of State

Entity Name: PACIFIC BLOOMS OF FLORIDA, CORP.						
Current Principal Place of Business:				New Principal Place of Business:		
6117 NW 72 MIAMI, FL 3						
Current Mailing Address:				New Mailing Address:		
6117 NW 72 AVE. MIAMI, FL 33166						
FEI Number: 20-0875582 FEI Number Applied For ( ) FEI Number			FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
MAZZA-MARTINEZ, TANIA A TWO DATRAN CENTER, 9130 SOUTH DADELAND BVD SUITE 1600 MIAMI, FL 33156 US				VARGAS, PIEDRA & CO. 9100 SOUTH DADELAND BLVD STE 912 MIAMI, FL 33156 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: AURELIO A PIEDRA				09/26/2006		
Electronic Signature of Registered Agent  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:						
Address:	P () I CHIRIBOGA, RO 6117 NW 72 AVE MIAMI, FL 3316	<b>.</b>		Title: ( Name: Address: City-St-Zip:	) Change()Addition	
Address:	VP () I LAPEIRE, ALEX 6117 NW 72 AVE MIAMI, FL 3316	<b>≣</b> .		Title: ( Name: Address: City-St-Zip:	) Change()Addition	
Title: Name:	. ,	Delete ARA, MARIA F MRS.		Title: (	) 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.

Address:

City-St-Zip:

SIGNATURE: ROMMER CHIRIBOGA R 09/26/2006