2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 30, 2005
Secretary of State

DOCUMENT# P04000055615

Entity Name: ROTHSTEINS RED ROOM, INC.

Current Principal Place of Business:

225 NE MIZNER BLVD SUITE 300
BOCA RATON, FL 33432

New Principal Place of Business:

105 W PALMETTO PARK RD
BOCA RATON, FL 33431

Current Mailing Address:

225 NE MIZNER BLVD SUITE 300
BOCA RATON, FL 33432

New Mailing Address:

105 W PALMETTO PARK RD
BOCA RATON, FL 33431

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

Name and Address of Current Registered Agent:

GRANER, THOMAS U
2000 GLADES RD
SUITE 412
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

TRISCARI, BEN
6401 E ROGERS CIR
SUITE 7
BOCA RATON, FL 33487 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: B. TRISCARI 11/30/2005
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:

Title: D ( ) Delete
Name: FISCHER, DENNIS
Address: 225 NE MIZNER BLVD SUITE 300
City-St-Zip: BOCA RATON, FL 33432

Title: D (X) Delete
Name: BARECICH, FRANK
Address: 225 NE MIZNER BLVD SUITE 300
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: TRISCARI, B
Address: 6401 E ROGERS CIR
City-St-Zip: BOCA RATON, FL 33487

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: B. TRISCARI PRES 11/30/2005
Electronic Signature of Signing Officer or Director Date