

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000057394

FILED
Nov 06, 2006
Secretary of State

Entity Name: DUTCH UNCLE'S BRIDE, INC.

Current Principal Place of Business:

522 BRIAR WOOD CIRCLE
HOLLYWOOD, FL 33024

New Principal Place of Business:

Current Mailing Address:

522 BRIAR WOOD CIRCLE
HOLLYWOOD, FL 33024

New Mailing Address:

FEI Number: 20-0971300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARRY BRAZER, CPA
18655 NE 21 AVE
NORTH MIAMI BEACH, FL 33179 US

Name and Address of New Registered Agent:

AVAKIAN, ROXIE M
522 BRIAR WOOD CIRCLE
HOLLYWOOD, FL 33024 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: ROXIE M AVAKIAN

11/06/2006

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: P () Delete
Name: HYNES, CHERYL A
Address: 522 BRIAR WOOD CIRCLE
City-St-Zip: HOLLYWOOD, FL 33024

Title: V () Delete
Name: AVAKIAN, ROXIE M
Address: 522 BRIAR WOOD CIRCLE
City-St-Zip: HOLLYWOOD, FL 33024

Title: T () Delete
Name: HYNES, CHERYL A
Address: 522 BRIAR WOOD CIRCLE
City-St-Zip: HOLLYWOOD, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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.

SIGNATURE: ROXIE M AVAKIAN

V

11/06/2006

Electronic Signature of Signing Officer or Director

Date