2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Jul 16, 2006
Secretary of State

DOCUMENT# P04000067867

Entity Name: LILIE LOVE ENTERTAINMENT, INC.

Current Principal Place of Business:

4919 SW 164 AVE
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

4919 SW 164 AVE
MIRAMAR, FL 33027

New Mailing Address:

FEI Number: 20-5182661 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TAX RESOURCE CENTER OF FLORIDA, INC.
20401 NW 2ND AVE STE 103
MIAMI, FL 33169 US

Name and Address of New Registered Agent:

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: NOAH MOMPOINT
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: CLEMENT, LILLIAN
Address: 4919 SW 164 AVE
City-St-Zip: MIRAMAR, FL 33027

Title: T ( ) Delete
Name: CLEMENT, GEANNE
Address: 4919 SW 164 AVE
City-St-Zip: MIRAMAR, FL 33027

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CLEMENTE, LILLIAN
Address: 4919 SW 164 AVE
City-St-Zip: MIRAMAR, FL 33027

Title: VP (X) Change ( ) Addition
Name: CLEMENTE, GEANNE
Address: 4919 SW 164 AVE
City-St-Zip: MIRAMAR, FL 33027

Title: VP ( ) Change (X) Addition
Name: CLEMENTE, SKYLER
Address: 4919 SW 164 AVENUE
City-St-Zip: MIRAMAR, FL 33027 FL

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: LILLIAN CLEMENTE P 07/16/2006
Electronic Signature of Signing Officer or Director Date