2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000117962

me: SOLIVENIR BARBERSHOP INC

FILED Oct 13, 2005 Secretary of State

Entity Nai	me: SOUVENIF	R BARBERSHOP, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
	7TH STREET E, FL 33068	JS			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	IST PLACE ION, FL 33317	US			
FEI Number:		FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	l Address of Cu	ırrent Registered Agent:	Name and Address o	f New Registered Agent:	
The above	2ND TER ION, FL 33317	US ubmits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE: DADY JUL	ES			
		Signature of Registered Ag		Date	
		[2)(b), F.S., the corporation did n Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ()[EDOUARD, KINS 7572 NW 1ST PL PLANTATION, FL	ACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	PAPTISTE, PHILI 1542 NW 12TH A		Title: Name: Address: CitysSt-Zin:	() Change () Addition	

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: KINSONN EDOUARD OFF 10/13/2005