

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000128196

Entity Name: TASTES OF EUROPE, INC.

**FILED**  
**Aug 10, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

1811 WILEY STREET  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

1811 WILEY STREET  
HOLLYWOOD, FL 33020

**New Mailing Address:**

FEI Number: 20-1614016

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FERNANDO, PIEDRA  
1811 WILEY STREET  
HOLLYWOOD, FL 33020 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: FERNANDO PIEDRA

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: DP ( ) Delete  
Name: FARKAS, BIANCA  
Address: 1811 WILEY STREET  
City-St-Zip: HOLLYWOOD, FL 33020

Title: V ( ) Delete  
Name: PIEDRA, FERNANDO  
Address: 1811 WILEY STREET  
City-St-Zip: HOLLYWOOD, FL 33020

Title: ST ( ) Delete  
Name: PIEDRA, FERNANDO  
Address: 1811 WILEY STREET  
City-St-Zip: HOLLYWOOD, FL 33020

**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 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: FERNANDO PIEDRA

V

08/10/2009

Electronic Signature of Signing Officer or Director

Date