## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000134913

3325 HIGH STREET

FAIRLAWN, NJ 07610 US

Address:

City-St-Zip:

Entity Name: 89 SEACREST, INC.

FILED Oct 07, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of E	New Principal Place of Business:	
C/O CHAIN	LYWOOD BLVD M GIDALI DOD, FL 33020	US	2200 HOLLYWOOD BLVE C/O CHAIM GIDALI HOLLYWOOD, FL 33020		
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
2847 HOLLYWOOD BLVD C/O CHAIM GIDALI HOLLYWOOD, FL 33020 US		US	2200 HOLLYWOOD BLVD C/O CHAIM GIDALI HOLLYWOOD, FL 33020 US		
FEI Number:	:	FEI Number Applied For ( )	FEI Number Not Applicable (X)	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of No	Name and Address of New Registered Agent:	
1909 TYLE PENTHOL	STROM, KEITH ER STREET JSE DOD, FL 33020	US			
	named entity sule of Florida.	bmits this statement for the p	ourpose of changing its registered of	fice or registered agent, or both,	
SIGNATUR	RE: KEITH WAS				
		Signature of Registered Ag		Date	
		2)(b), F.S., the corporation did no rust Fund Contribution (  ).	of receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES 1	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () D LEYBOVICH, LAZ 317 AVENUE O BROOKLYN, NY	AR	Title: ( ) ( Name: Address: City-St-Zip:	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () D SAVITSKY, BORIS 20 JOSEPH COUI MONMOUTH JUNG	S RT	Title: ( ) ( Name: Address: City-St-Zip:	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () D ARONOV, IGOR 5 PARK VIEW PLA FAIRLAWN, NJ 0	ACE	Title: ( ) ( Name: Address: City-St-Zip:	Change ()Addition	
Title: Name:	S ()D ARONOV, YAN	elete	Title: ( ) <sup>(</sup> Name:	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.

Address:

City-St-Zip:

SIGNATURE: LAZAR LEYBOVICH P 10/07/2005