2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000141642

Entity Name: FRA GARDEN & GIFTS INC

FILED Oct 05, 2006 Secretary of State

Entity Nar	ne: ERA GAR	DEN & GIFTS, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
240 N DIXI BAY 18	E HIGHWAY				
	OOD, FL 33020	US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
PO BOX 22 HOLLYWO	21263 DOD, FL 33022	US			
FEI Number:	20-1739535	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
240 N DIXI BAY 18	N, HUMBERTO E HIGHWAY DOD, FL 33020				
	named entity s e of Florida.	ubmits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE: HUMBER	TO A. SHERIDAN			
Electronic Signature of Registered Agent			ent	Date	
		(2)(b), F.S., the corporation did n Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () SHERIDAN, HUN 240 N DIXIE HIG HOLLYWOOD, F	SHWAY BAY 18	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LEVY, ELIAS	Delete AVENUE #3002 FL 33160 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	DS () LEVY, RAFAEL	Delete	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: SHERIDAN HUMBERTO A. DP 10/05/2006

3500 MYSTIC POINTE DRIVE #513

AVENTURA, FL 33180 US

Address: City-St-Zip: