

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000157170

Entity Name: CASAS D'GIORDANO, INC.

FILED
May 23, 2007
Secretary of State

Current Principal Place of Business:

12732 SW 93RD ST
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

12732 SW 93RD ST
MIAMI, FL 33186

New Mailing Address:

P O BOX 558796
MIAMI, FL 33255

FEI Number: 76-0771996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIORDANO, CLAUDIA
12732 SW 93RD ST
MIAMI, FL 33186 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: CLAUDIA GIORDANO

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: PD () Delete
Name: GIORDANO, CLAUDIA
Address: 12732 SW 93RD ST
City-St-Zip: MIAMI, FL 33186

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GIORDANO, CLAUDIA
Address: P O BOX 558796
City-St-Zip: MIAMI, FL 33255 US

Title: VPD () Change (X) Addition
Name: DIMITRJEVITCH, CHRISTIAN
Address: P O BOX 558796
City-St-Zip: MIAMI, FL 33255 US

Title: STD () Change (X) Addition
Name: BAGES, PAULA
Address: P O BOX 558796
City-St-Zip: MIAMI, FL 33255 US

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: CLAUDIA GIORDANO

PD

05/23/2007

Electronic Signature of Signing Officer or Director

Date