2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000025322

Entity Name: CUISINE WORKS, INC.

FILED Feb 20, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12480 GRIFFING BLVD. 9424 ABBOTT AVE MIAMI, FL 33161 MIAMI BEACH, FL 33154

Current Mailing Address: New Mailing Address:

12480 GRIFFING BLVD. 9424 ABBOTT AVE MIAMI, FL 33161 9424 ABBOTT AVE MIAMI BEACH, FL 33154

FEI Number: 20-2502479 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STANTIC, SIME

12480 GRIFFING BLVD.

MIAMI, FL 33161 US

STANTIC, SIME

9424 ABBOTT AVE

MIAMI BEACH, FL 33154 US

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: SIME STANTIC 02/20/2007

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition Name: STANTIC, SIME STANTIC, SIME

 Address:
 12480 GRIFFING BLVD.
 Address:
 9424 ABBOTT AVE

 City-St-Zip:
 MIAMI, FL 33161
 City-St-Zip:
 MIAMI BEACH, FL 33154

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 STANTIC, SIADJA
 Name:
 STANTIC, SIADJA

 Address:
 12480 GRIFFING BLVD.
 Address:
 9424 ABBOTT AVE

 City-St-Zip:
 MIAMI, FL 33161
 City-St-Zip:
 MIAMI BEACH, FL 33154

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.

SIGNATURE: SIME STANTIC DP 02/20/2007