2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000120779

Entity Name: MIAFLORENCE, INC.

FILED Oct 20, 2009 Secretary of State

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

9595 COLLINS AVE SUITE N9-D SURFSIDE, FL 33154

Current Mailing Address: New Mailing Address:

C/O OPERA GALLERY 9700 COLLINS AVENUE, STE. #218 BAL HARBOUR, FL 33154

FEI Number: 51-0606005 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:

MARKOWICZ, BERNARD

16486 NE 32 ND AVE

NORTH MIAMI BEACH, FL 33160 US

JADE ASSOCIATES MIAMI INC

100 N BISCAYNE BLVD

500

MIAMI, FL 33132 US

The above named entity submite this statement for the numbers of changing its registered effice or re

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: OLIVIER SUREAU 10/20/2009

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: D () Delete Title: P (X) Change () Addition

Name: MICHEL, DYAN G

Address: 9595 COLLINS AVE. SUITE N9-D

Address: 9595 COLLINS AVE. SUITE N9-D

Address: 9595 COLLINS AVE. SUITE N9-D

 Address:
 9595 COLLINS AVE. SUITE N9-D
 Address:
 9595 COLLINS AVE. SUITE N9-D

 City-St-Zip:
 SURFSIDE, FL 33154
 City-St-Zip:
 SURFSIDE, FL 33154

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Title: DIR () Delete Title: DIR (X) Change () Addition
Name: MARKOWICZ, BERNARD Name: MARKOWICZ, BERNARD
Address: 16486 NE 32 ND AV

 Address:
 16486 NE 32 ND AV
 Address:
 17100 N BAY RD-UNIT 1908

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33160 US
 City-St-Zip:
 SUNNY ISLES, FL 33160 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: BERNARD MARKOWICZ DIR 10/20/2009

Electronic Signature of Signing Officer or Director

Date