## 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000135510

Entity Name: BABY FLOWERS & GIFTS, CORP

**FILED** Feb 08, 2008 Secretary of State

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

4811 NW 167 STREET 164 NE 105TH STREET

MIAMI, FL 33055 MIAMI SHORES, FL 33138 US

**Current Mailing Address: New Mailing Address:** 

4811 NW 167 STREET PO BOX 601573

MIAMI, FL 33055 MIAMI, FL 33160 US

FEI Number: 20-3656288 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:

SILVA'S ENTERPRISE, INC. MEDINA GROUP, INC. 5220 S UNIVERSITY DR 7220 NW 36 STREET SUITE 301 SUITE C-102 MIAMI, FL 33166 US DAVIE, FL 33328 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: MEDINA, HENRY J 02/08/2008

> 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: () Delete CRISTANCHO, ROSARIO Name: 4811 NW 167 STREET Address: City-St-Zip: MIAMI, FL 33055 US

Title: VΡ () Delete PRADA, EDUARDO Name: 4811 NW 167 STREET Address: MIAMI, FL 33055 US City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition MINONES, CLAUDIO A SENIOR Name: 164 NE 105TH STREET Address: City-St-Zip: MIAMI SHORES, FL 33138 US

Title: PD (X) Change ( ) Addition

Name: PEREZ, MARIA N Address: 1251 NE 108 ST #725 MIAMI, FL 33161 US City-St-Zip:

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: PEREZ, MARIA N PD 02/08/2008