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APPROVED AND FILED

07 JUN 20 PM 4:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P05000148303

1. Entity Name
DIVA'S NIGHT OUT, INC.

Principal Place of Business	Mailing Address
11110 WEST OAKLAND PARK BLVD #362 SUNRISE, FL 33351	11110 WEST OAKLAND PARK BLVD #362 SUNRISE, FL 33351

06202007 REIN-P CR2E098 (1/07)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number ☐ Applied For ☒ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAVES, JESSE C 11110 WEST OAKLAND PARK BLVD #362 SUNRISE, FL 33351	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Rhonda Hight 11110 West Oakland Park Blvd., #362 Sunrise, FL 33351	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRINSON, MYONG HUI 11110 WEST OAKLAND PARK BLVD #362 SUNRISE, FL 33351	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

REINSTATEMENT 06-07

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jesse Graves, Director, by C.DeMaio as attorney-in-fact June 20, 2007 5616948107
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #

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Florida Department of State
Division of Corporations
Public Access System

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To:
Division of Corporations
Fax Number : (850)205-0384

From:
Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

CORPORATION REINSTATEMENT

DIVA'S NIGHT OUT, INC.

Certificate of Status	0
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$300.00

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