2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 17, 2007
Secretary of State

DOCUMENT# P06000016568

Entity Name: SPICE ENTERPRISES, INC.

Current Principal Place of Business:

415 METZ LANE
KISSIMMEE, FL 34759

New Principal Place of Business:

Current Mailing Address:

PO BOX 421315
KISSIMMEE, FL 34742

New Mailing Address:

FEI Number: 20-4283382 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HINCKSON, DIANNE
415 METZ LANE
KISSIMMEE, FL 34742 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: DIANNE HINCKSON
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: P ( ) Delete
Name: HINCKSON, DIANNE
Address: 415 METZ LANE
City-St-Zip: KISSIMMEE, FL 34759

Title: VP ( ) Delete
Name: HINCKSON, DONNA
Address: 415 METZ LANE
City-St-Zip: KISSIMMEE, FL 34759

Title: DIR ( ) Delete
Name: MITCHELL, WAYNE
Address: 415 METZ LANE
City-St-Zip: KISSIMMEE, FL 34759

Title: DIR ( ) Delete
Name: FORRESTER, SEAN
Address: 415 METZ LANE
City-St-Zip: KISSIMMEE, FL 34759

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: DIANNE HINCKSON P 10/17/2007
Electronic Signature of Signing Officer or Director Date