

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000018999

Entity Name: LA BELLE UNISEX CORP.

FILED
Mar 13, 2009
Secretary of State

Current Principal Place of Business:

5301 NW 36TH STREET
MIAMI, FL 33166

New Principal Place of Business:

5301 NW 36TH STREET
MIAMI SPRINGS, FL 33166

Current Mailing Address:

5301 NW 36TH STREET
MIAMI, FL 33166

New Mailing Address:

5301 NW 36TH STREET
MIAMI SPRINGS, FL 33166

FEI Number: 20-4334510

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZUNIGA, ALBY F
5720 SW 112TH AVENUE
MIAMI, FL 33173 US

Name and Address of New Registered Agent:

ZUNIGA, ALBY F
5301 NW 36TH STREET
MIAMI SPRINGS, FL 33166 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: ALBY ZUNIGA

03/13/2009

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:

Title: PD () Delete
Name: ZUNIGA, ALBY F
Address: 5720 SW 112TH AVENUE
City-St-Zip: MIAMI, FL 33173

Title: VD () Delete
Name: ZUNIGA, RAMON A
Address: 5720 SW 112TH AVENUE
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ZUNIGA, ALBY F
Address: 5301 NW 36TH STREET
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: VD (X) Change () Addition
Name: ZUNIGA, RAMON A
Address: 5301 NW 36TH STREET
City-St-Zip: MIAMI SPRINGS, FL 33166

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: ALBY ZUNIGA

PD

03/13/2009

Electronic Signature of Signing Officer or Director

Date