

# 2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000068252

**FILED**  
**Dec 07, 2010**  
**Secretary of State**

**Entity Name:** CREPES BY THE SEA COMPANY

**Current Principal Place of Business:**

MOBILE UNIT  
PALM BEACH COUNTY, FL 33444

**New Principal Place of Business:**

6NE 5TH AVENUE  
DELRAY BEACH, FL 33483 PB

**Current Mailing Address:**

1104 ANCHOR POINT  
DELRAY BEACH, FL 33444

**New Mailing Address:**

6NE 5TH AVENUE  
DELRAY BEACH, FL 33483 PB

**FEI Number:** 90-0299762

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SEIFTS, BETTINA H  
1104 ANCHOR POINT  
DELRAY BEACH, FL 33444 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: BETTINA SEIFTS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SEIFTS, BETTINA H  
Address: 1104 ANCHOR POINT  
City-St-Zip: DELRAY BEACH, FL 33444

Title: VP  
Name: SEIFTS, JASON R  
Address: 1104 ANCHOR POINT  
City-St-Zip: DELRAY BEACH, FL 33444

I hereby 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 all other like empowered.

SIGNATURE: BETTINA SEIFTS

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

P

12/07/2010

\_\_\_\_\_  
Date