

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000083055

FILED
Feb 13, 2008
Secretary of State

Entity Name: WAREHOUSE OF ARTS CORPORATION

Current Principal Place of Business:

501 PARK AVENUE SOUTH
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

501 PARK AVENUE SOUTH
WINTER PARK, FL 32789 US

New Mailing Address:

344 MAPLE AVENUE W
236
VIENNA, VA 22180

FEI Number: 20-5316739

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUVEKOT CORPORATION
8278 NW 66TH STREET
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

FABIO O CATAO
501 PARK AVENUE SOUTH
WINTER PARK, FL 32789 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: FABIO CATAO

02/13/2008

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: D () Delete
Name: CATAO, FABIO O
Address: 12012 ASHTON MANOR WAY #211
City-St-Zip: ORLANDO, FL 32828 US

Title: D () Delete
Name: SPERB, VIVIANE
Address: 12012 ASHTON MANOR WAY #211
City-St-Zip: ORLANDO, FL 32828 US

Title: P () Delete
Name: CATAO, FABIO O
Address: 12012 ASHTON MANOR WAY #211
City-St-Zip: ORLANDO, FL 32828 US

Title: S () Delete
Name: SPERB, VIVIANE
Address: 12012 ASHTON MANOR WAY #211
City-St-Zip: ORLANDO, FL 32828 US

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: FABIO CATAO

MRS

02/13/2008

Electronic Signature of Signing Officer or Director

Date