

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000100487

Entity Name: IEL PROMOTIONS, INC.

FILED
Oct 01, 2008
Secretary of State

Current Principal Place of Business:

16 TIDEWATER DRIVE
ORMOND BEACH, FL 32174

New Principal Place of Business:

1717 N BAYSHORE DR
#207
MIAMI, F 33132

Current Mailing Address:

16 TIDEWATER DRIVE
ORMOND BEACH, FL 32174

New Mailing Address:

1717 N BAYSHORE DR
#207
MIAMI, F 33132

FEI Number: 20-5184597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALLE', KAREN M
16 TIDEWATER DRIVE
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

SALLE', KAREN M
1717 N BAYSHORE DR
#207
MIAMI, FL FL 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: KAREN SALLE'

10/01/2008

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: P,VP () Delete
Name: SALLE', KAREN M
Address: 16 TIDEWATER DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: T,S () Delete
Name: SALLE', KAREN M
Address: 16 TIDEWATER DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,S (X) Change () Addition
Name: SALLE', KAREN M
Address: 1717 N BAYSHORE DR #207
City-St-Zip: MIAMI, FL 33132

Title: VP (X) Change () Addition
Name: SALLE', ASHLEE M
Address: 1717 N BAYSHORE DRIVE #207
City-St-Zip: MIAMI, FL 33132

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: KAREN SALLE'

P

10/01/2008

Electronic Signature of Signing Officer or Director

Date