## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P06000118100

**Entity Name:** GLAMOROUS EVENTS BY MARY, INC.

214 EAST GASTON, BASEMENT

SAVANNAH, GA 31401 US

Address: City-St-Zip:

FILED Oct 08, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1236 NW 125TH TERRACE 1876 N. UNIVERSITY DRIVE, SUITE 200 M & L SUNRISE, FL 33323 PLANTATION, FL 33322 LIS **Current Mailing Address: New Mailing Address:** 1236 NW 125TH TERRACE SUNRISE, FL 33323 FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DE FARIA, MARY S 1236 NW 125TH TERRACE SUNRISE, FL 33323 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: MARY STELA DE FARIA 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition DE FARIA, MARY S Name: Name: 1236 NW 125TH TERRACE Address: Address: City-St-Zip: SUNRISE, FL 33323 US City-St-Zip: ( ) Delete Title: VΡ Title: () Change () Addition POMBARES, BRUNO M Name: Name: 1236 NW 125TH TERRACE Address: Address: SUNRISE, FL 33323 US City-St-Zip: City-St-Zip: (X) Delete Title: Title: **MNGR** () Change () Addition DE FARIA, GLORIA E Name: Name:

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.

Address:

City-St-Zip:

Ρ SIGNATURE: MARY STELA DE FARIA 10/08/2007