

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000149219

Entity Name: GINGER WEAR INC

FILED
Feb 27, 2008
Secretary of State

Current Principal Place of Business:

680 NE 64 STREET #A-110
MIAMI, FL 33138

New Principal Place of Business:

680 NE 64 STREET
#A-110
MIAMI, FL 33138

Current Mailing Address:

680 NE 64 STREET #A-110
MIAMI, FL 33138

New Mailing Address:

FEI Number: 20-8110611 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESKENASY, NATALIE
680 NE 64TH STREET #A-110
MIAMI, FL 33138 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: NATALIE ESKENASY

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: PRES () Delete
Name: ESKENASY, NATALIE
Address: 680 NE 64 STREET #A-110
City-St-Zip: MIAMI, FL 33138

Title: TRES () Delete
Name: ESKENASY, NATALIE
Address: 680 NE 64 STREET #A-110
City-St-Zip: MIAMI, FL 33138

Title: SECT () Delete
Name: ESKENASY, NATALIE
Address: 680 NE 64 STREET #A-110
City-St-Zip: MIAMI, FL 33138

Title: DIR () Delete
Name: ESKENASY, NATALIE
Address: 680 NE 64 STREET #A-110
City-St-Zip: MIAMI, FL 33138

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: NATALIE ESKENASY

Electronic Signature of Signing Officer or Director

MRS

02/27/2008

Date