2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000152851

Entity Name: IKE IKE BLENDS, INC.

City-St-Zip:

FILED Sep 18, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

15476 NW 77TH CT., STE. 225 15476 NW 77TH CT. MIAMI LAKES, FL 33016 STE. 225

MIAMI LAKES, FL 33016

Current Mailing Address: New Mailing Address:

15476 NW 77TH CT., STE. 225 15476 NW 77TH CT.

MIAMI LAKES, FL 33016 STE. 225

MIAMI LAKES, FL 33016

FEI Number: 20-8030542 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LLAVONA, RAMON LLAVONA, RAMON 400 SW 2ND STREET 400 SW 2ND STREET SUITE 303 SUITE 303 MIAMI, FL 33130 MIAMI, FL 33130 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: RAMON LLAVONA 09/18/2007

> 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:

City-St-Zip:

Title: () Delete () Change () Addition

LLAVONA, RAMON Name: Name: 400 SW 2ND STREET SUITE 303 Address: Address: City-St-Zip: MIAMI, FL 33130 City-St-Zip:

Title: DVS Title: (X) Change () Addition

() Delete CATA, CARLOS Name: CATA, CARLOS Name: 400 SW 2ND STREET SUITE 303 Address: 17038 SW 39TH ST Address: MIAMI, FL 33130 MIRAMAR, FL 33027

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: RAMON LLAVONA **DPT** 09/18/2007