## 2010 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P07000018582

Entity Name: SIGNATURE STYLES PRODUCTION INC.

FILED Oct 02, 2010 Secretary of State

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

2981 N NOBHILL RD. SUNRISE, FL 33322 US

Current Mailing Address: New Mailing Address:

2981 N NOBHILL RD. 15795 NW 12CT

SUNRISE, FL 33322 US PEMBROKE PINES, FL 33028 US

FEI Number: 20-8431546 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:

SCHOFIELD, DANNY 2981 N. NOBHILL RD. APT. 204 SUNRISE, FL 33322 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: DANNY SCHOFIELD

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PRES

Name: SCHOFIELD, DANNY

Address: 2981 N. NOBHILL RD., APT. 204 City-St-Zip: SUNRISE, FL 33322 US

Title: TRES

Name: CATHERINE, SCHOFIELD
Address: 2981 N. NOBHILL RD., APT. 204
City-St-Zip: SUNRISE, FL 33322 US

y ot 21p. | GONTRIOL, 1 L GGGZZ

Title: SECT

Name: DANNY, SCHOFIELD SENIOR Address: 2981 N. NOBHILL RD., APT. 204 City-St-Zip: SUNRISE, FL 33322 US

Title: DIR

Name: SCHOFIELD, DANNY

Address: 2981 N. NOBHILL RD., APT. 204 City-St-Zip: SUNRISE, FL 33322 US

I hereby 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 all other like empowered.

SIGNATURE: DANNY SCHOFIELD PRES 10/02/2010