

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000054783

Entity Name: CHANIS COUTURE, CORP.

FILED
Jan 15, 2009
Secretary of State

Current Principal Place of Business:

277 MIRACLE MILE #202
CORAL GABLES, FL 33134

New Principal Place of Business:

1295 CORAL WAY
MIAMI, FL 33145

Current Mailing Address:

277 MIRACLE MILE #202
CORAL GABLES, FL 33134

New Mailing Address:

1295 CORAL WAY
MIAMI, FL 33145

FEI Number: 26-0141990

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MITCHELL, GERALDINE
277 MIRACLE MILE #202
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

MITCHELL, GERALDINE
1295 CORAL WAY
MIAMI, FL 33145 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: GERALDINE MITCHELL

01/15/2009

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: DP () Delete
Name: MITCHELL, GERALDINE
Address: 277 MIRACLE MILE #202
City-St-Zip: CORAL GABLES, FL 33134

Title: DV () Delete
Name: CHANIS, ENRIQUE
Address: 277 MIRACLE MILE #202
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MITCHELL, GERALDINE
Address: 1295 CORAL WAY
City-St-Zip: MIAMI, FL 33145

Title: DV (X) Change () Addition
Name: CHANIS, ENRIQUE
Address: 1295 CORAL WAY
City-St-Zip: MIAMI, FL 33145

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: GERALDINE MITCHELL

PD

01/15/2009

Electronic Signature of Signing Officer or Director

Date