## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P07000114946

Entity Name: LEOVER MIAMI INVESTMENT, INC.

**FILED** Nov 05, 2008 Secretary of State

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

520 BRICKELL KEY DRIVE SUITE 0-305 391 ARAGON AVE

MIAMI, FL 33131 CORAL GABLES, FL 33134

**Current Mailing Address: New Mailing Address:** 

520 BRICKELL KEY DRIVE SUITE 0-305 391 ARAGON AVE

MIAMI, FL 33131 CORAL GABLES, FL 33134

FEI Number: 26-1393025 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:

TRANSGLOBAL CORPORATE ADMINISTRATION, LLC

520 BRICKELL KEY DRIVE SUITE 0-305

391 ARAGON AVE CORAL GABLES, FL 33134 MIAMI, FL 33131 US 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.

LAURENT & PATRICK HAIR SPA

SIGNATURE: PATRICK VERHELST 11/05/2008

> 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: DPST () Delete () Change () Addition

VERHELST, PATRICK Name: Name: 2 AV, DE BROQUEVILLE Address: Address: City-St-Zip: BRUSSELS 1150, BELGIUM, OC City-St-Zip:

Title: **DVAS** () Delete Title: () Change () Addition

Name: LEONARD, LAURENT Name: 2 AV, DE BROQUEVILLE Address: Address: BRUSSELS 1150, BELGIUM, OC City-St-Zip: 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.

Ρ SIGNATURE: PATRICK VERHELST 11/05/2008