2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 16, 2009
Secretary of State

DOCUMENT# P08000029248

Entity Name: DELICIOUS BLESSINGS, INC.

Current Principal Place of Business:

1103 NW 58TH TERRACE
#219
FT. LAUDERDALE, FL 33313

New Principal Place of Business:

615 NORTH OCEAN BLVD.
POMANO BEACH, FL 33062

Current Mailing Address:

1103 NW 58TH TERRACE
#219
FT. LAUDERDALE, FL 33313

New Mailing Address:

1009 NORTH OCEAN BLVD
#609
POMANO BEACH, FL 33062

FEI Number: 61-1598015 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WELLINGTON, DELORAINE A
1103 NW 58TH TERRACE
#219
FT. LAUDERDALE, FL 33313 US

Name and Address of New Registered Agent:

WELLINGTON, DELORAINE A
1009 NORTH OCEAN BLVD
609
POMANO BEACH, FL 33062 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: D WELLINGTON 11/16/2009
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: P ( ) Delete
Name: WELLINGTON, DELORAINE A
Address: 1103 NW 58TH TERRACE #219
City-St-Zip: FT. LAUDERDALE, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WELLINGTON, DELORAINE A
Address: 1009 NORTH OCEAN BLVD
City-St-Zip: POMANO BEACH, FL 33062

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: D WELLINGTON P 11/16/2009
Electronic Signature of Signing Officer or Director Date