

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000093318

FILED
Oct 27, 2009
Secretary of State

Entity Name: CELEBRATION PARTY & EVENT SERVICES, INC.

Current Principal Place of Business:

2671 HYPOLUXO RD
LANTANA, FL 33462 US

New Principal Place of Business:

Current Mailing Address:

2671 HYPOLUXO RD
LANTANA, FL 33462 US

New Mailing Address:

FEI Number: 26-3572107

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACHADO, STEFANY
2671 HYPOLUXO RD
LANTANA, FL 33462 US

Name and Address of New Registered Agent:

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: STEFANY MACHADO

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: MACHADO, STEFANY
Address: 2671 HYPOLUXO RD
City-St-Zip: LANTANA, FL, FL 33462 US

Title: T () Delete
Name: FLORES, LUZ
Address: 2671 HYPOLUXO RD
City-St-Zip: LANTANA, FL 33462 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: STEFANY MACHADO

P

10/27/2009

Electronic Signature of Signing Officer or Director

Date