

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P13000081032

Entity Name: MARISSA CUISINE INC

**FILED**  
**Dec 01, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

2454 MCMULLEN BOOTH RD  
205  
CLEARWATER, FL 33759 US

**New Principal Place of Business:**

**Current Mailing Address:**

2454 MCMULLEN BOOTH RD  
205  
CLEARWATER, FL 33759 US

**New Mailing Address:**

FEI Number: 46-3803114

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MOSES, CHAD D  
7960 ABERDEEN CIRCLE  
LARGO, FL 33773 US

**Name and Address of New Registered Agent:**

MOSES, CHAD D  
111 PEACOCK CIR  
SAFETY HARBOR, FL 34695 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: CHAD D MOSES

12/01/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: MOSES, CHAD D  
Address: 111 PEACOCK CIR  
City-St-Zip: SAFETY HARBOR, FL 34695 US

Title: VP  
Name: MOSES, GAIL G  
Address: 2306 MOHAWK LN  
City-St-Zip: GLENVIEW, IL 60026 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: CHAD D MOSES

CEO

12/01/2014

Electronic Signature of Signing Officer or Director

Date