	-	DI E A O I			DUCTIONS	DEEODE (	COMPLET	INC THIS EODM		
PLEASE READ AI APPLICATION FOR REINSTATEMENT				FLORIDA S	A DEPARTMENT Sandra B. Mor Secretary of Strictly of Corporation of	NT OF STATE <b>tham</b> State	· [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [			
DOCUMENT # PASTON 40372  1. Corporation Name NEXT GENERATION FASHION AND PATTERNS, INC.							SECRETARY OF STATE TALLAMASSEE, FLORIDA			
1650 W. Oakland Park Boulevard, St Fort Lauderdale, FL 33311 Principal Place of Business Mailing Addre					e.66, Unit.					
Suite.66, Unit.9127				Suite.6	1650 W.Oakland Pk.Blvd. Suite.66, Unit.9127 Fort Lauderdale, FL 33311			REINSTATEMENT OF 1-98		
If above addresses are incorrect in any way, line through incorrect in any way, line t					ng Office Address, If		4. Date Incorporated or Qualified To Do Business in Florida  June/08/1993			
City & State  Zip Country				City & State	Countr		5. FEI Numbe	65-0407022 58.7	Applied For Not Applicable S Additional Fee required	
7. Names and Street Addresses of Each Officer and/or Direct Name of Officers and/or Directors				or Director (Flor	Str. Of	ations must list at le eet Address of Eac licer and/or Directo se Post Office Box i	est 3 directors)  City / State / Zip			
PTD	Cleone Flores Soares 3				3101 Oakland Shores Drive Fort Lauderdale, FL 33309 Apartment.H-105					
VPD SD	Antonio Murilo Nogueira  Diana Adriano				4315 Reflections Boulevard Sunrise, FL 33351 Apartment.204 North 3101 Oakland Shores Drive Fort Lauderdale, FL 33309					
				Apartment.H-105 90002621479				1088019		
8. Name and Address of Current Registered Agent						Name and Address of New Registered Agent     Name				
DIANA ADRIANO 3101 Oakland Shores Drive Apartment,H-105 Fort Lauderdale, FL 33309						Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, Etc.  City State Zip Code				
10. I, being appointed the disistered agent of the above pamed corporation, am familiar with and accomplished Agent - Y INDICATE AGENT MUST SIGN							bligations of Sect	□ FL    Date   AuG   L	12/98	
			wes or ha al Propert		e current yea June 30.	ar Yes 🗷	No □		e for information gible tax.)	
this rein	nstate <b>me</b> nt app	lication, the i	eason for dissel a paid and the n	ution has been ames of individu	eliminated, the corpo	orate name satisfies in do not qualify for	the requirements an exemption un	apter 607 or 617, F.S. I further s of section 607.0401 or 617.04 ider section 119.07(3)(i), F.S. 1	01, F.S., that all fees	
SIGNAT	TURE:	ALLALIS MATURIE ANI	O TYPED OR PRIN	ITED NAME OF S	IGNING OFFICER OR I	DIRECTOR	AV.6.	12/98 (95 Date	y) 486-9962 Viline Phone #	