2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P96000084743 1. Entity Name OL, DEC 28 PH 1: 24								
DOCUMENT # P96000084743					0	ILDEC 28	OF STATE EE. FLORIDA	
1. Entity Name BARDELS MANAGEMENT, INC.						- OFTARY	OF STATE	
					SECHETASS	EE, FLOTTE		
Principal Plac	ce of Business	•		3 hrs m.				
3930 INVERARRY BLVD. Suite 201		3930 INVERARRY BLVD. Suite 201						
LAUDERHILL, FL 33319 LAUDERHILL, FL 33319			9 US	S		I dan dian dan ba ar da a	t 30(C) (Cill Cint Inde Di	PER MARTIN MARTIN
	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			11302004	REIN-P	CR2E098 (6/0	04)
City & State		City & State			4. FEI Number 65-0735445			Applied For Not Applicable
Zip Country		Zip Count		itry	5. Certificate of Status Desired		№ \$8.75	Additional
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered								
WEINSCHNEIDER, SIDNEY				Name		<u></u>	·-···	
3930 INVERARRY BLVD. SUITE 201				Street Address (P.O. Box Number is Not Acceptable)				
LAUDERHILL, FL 33319				· · · · · · · · · · · · · · · · · · ·		TATISAL		N
City U (ICIU V & B C C C C C C C C C C C C C C C C C C								
8. The above named entity stibmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE SIGNATURE 12/21/04								
Signature, typed or printed name of registered agent and utile if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
	E NOW!!! FEE IS \$750.00 nuary 1, 2005, Fee will be \$900.00	•						
10.	OFFICERS AND D	DIRECTORS	11,		ADDITIONS/C	HANGES TO OFFI	CERS AND DIRECT	ORS IN 11
TITLE NAME	PSD WEINSCHNEIDER, SIDNEY	☐ Delete	TITLE		20	iDD43∈	□Chan 76922	
STREET ADDRESS	3930 INVERARRY BLVD., STE 21	10	STRE	ET ADORESS	12/28/	0401049	013 **7	58.75
CITY-ST-ZIP	VD LAUDERHILL, FL 33319	☐ Delete	TITLE	-ST-ZIP				ge 🔲 Addition
NAME STREET ADDRESS	WEINSCHEIDER, BEN		MAM	E				,0
CITY-ST-ZIP	3930 INVERARRY BLVD, SUITE : LAUDERHILL, FL 33319	210		et address -st-zip				
TITLE .		Delete	, TITLE	- 1	٠		Chan	ge Addition
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP TITLE		☐ Delete	CITY- TITLE	-ST-ZIP			☐ Chan	no. O addition
NAME		C Delete	NAME	:			Chair	ge Addition
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS ST-ZIP				
TITLE		☐ Delete	TITLE	l			☐ Chan	ge Addition
NAME STREET ADDRESS			NAME	ET ADDRESS				
CITY-ST-ZIP			CITY-	ST-ZIP				
TITLE NAME		☐ Delete	TITLE NAME	l l			⁻ ☐ Chang	ge 🔲 Addition
STREET ADDRESS CITY+ST-ZIP	•			ET ADORESS				
12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information								
indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attactionent with an address, with all other like empowered.								
SIGNATURE: Sidney Wernsepherdy 12/21/04								
	SIGNATURE AND EVERY OF BE	INTER NAME OF SIGNING OFFICER	O ONE OT	op / /	/	Dest		