

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000088638

**FILED**  
**Feb 08, 2008**  
**Secretary of State**

**Entity Name:** VIA SOLFERINO ITALIAN FURNITURE, INC.

**Current Principal Place of Business:**

3930 N.E. 2ND AVENUE., SUITE 105  
MIAMI, FL 33137 US

**New Principal Place of Business:**

**Current Mailing Address:**

3930 N.E. 2ND AVENUE., SUITE 105  
MIAMI, FL 33137 US

**New Mailing Address:**

5750 COLLINS AVE  
PENTHOUSE A  
MIAMI BEACH, FL 33137 US

**FEI Number:** 65-0707792

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SIMONA, CIANCETTA  
1756 N BAYSHORE DR #35G  
MIAMI, FL 33132 US

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

SIMONA, CIANCETTA  
5750 COLLINS AVE.  
PENTHOUSE A  
MIAMI BEACH, FL 33132 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:** SIMONA CIANCETTA

02/08/2008

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:** PTD ( ) Delete  
**Name:** CIANCETTA, SIMONA  
**Address:** 3930 N.E. 2ND AVENUE., SUITE 105  
**City-St-Zip:** MIAMI, FL 33137

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** PTD (X) Change ( ) Addition  
**Name:** CIANCETTA, SIMONA  
**Address:** 5750 COLLINS AVE  
**City-St-Zip:** MIAMI BEACH, FL 33137

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:** SIMONA CIANCETTA

PRES

02/08/2008

Electronic Signature of Signing Officer or Director

Date