

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000097995

Entity Name: VIE & ART COLLECTIONS, INC.

FILED
Sep 21, 2007
Secretary of State

Current Principal Place of Business:

441 N.E. 195TH STREET
#304
N. MIAMI BEACH, FL 33179

New Principal Place of Business:

New Mailing Address:

441 N.E. 195TH STREET
#304
N. MIAMI BEACH, FL 33179

Current Mailing Address:

P.O. BOX 530194
MIAMI SHORES, FL 33153

FEI Number: 65-0877133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIARD, EMILE
441 NE 195TH ST
#304
NORTH MIAMI BEACH, FL 33179 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: EMILE VIARD

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: VIARD, EMILE
Address: 441 NE 195TH ST #304
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: T () Delete
Name: FRANCE, ALCENA
Address: 6930 S.W. 24TH STREET
City-St-Zip: MIRAMAR, FL 33023

Title: SV () Delete
Name: GUILLAUME, MARTINE
Address: 525 NE 107TH ST
City-St-Zip: MIAMI, FL 33161

Title: MD () Delete
Name: VIARD, JEAN-YVES
Address: 525 NE 107TH ST
City-St-Zip: MIAMI, FL 33161

Title: S () Delete
Name: GUILLAUME, ANDRE
Address: 525 N.E. 107 STREET
City-St-Zip: MIAMI, FL 33161

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: VIARD, JEAN-YVES
Address: 425 ROCKBASS RD
City-St-Zip: SUWANEE, GA 30024

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

Title: VP (X) Change () Addition
Name: JEROME, BEATRIX
Address: 821 SW 113TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33025

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

Title: M () Change (X) Addition
Name: CONDE, ALIX
Address: 175-45 88TH AVE # 7B
City-St-Zip: JAMAICA, NY 11432

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: EMILE VIARD

P

09/21/2007

Electronic Signature of Signing Officer or Director

Date