

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000061833

Entity Name: SAPORI DI ROMA INC.

FILED
Feb 09, 2005
Secretary of State

Current Principal Place of Business:

6984 COLLINS AV
MIAMI BEACH, FL 331413206

New Principal Place of Business:

6984 COLLINS AVE
MIAMI BEACH, FL 331413206 US

Current Mailing Address:

1940 HARRISON ST, SUITE 201-B
HOLLYWOOD, FL 330205072

New Mailing Address:

1940 HARRISON ST, SUITE 201B
HOLLYWOOD, FL 330205072 US

FEI Number: 65-0930072

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALFON, MICHELLE
6984 COLLINS AVENUE
MIAMI BEACH, FL 33141 US

Name and Address of New Registered Agent:

JUMPING JAX TAX INC
1940 HARRISON ST
STE 201B
HOLLYWOOD, FL 330205072 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: JOHN J MALERBA

02/09/2005

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: CEO () Delete
Name: HALFON, MICHELLE
Address: 6984 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: HALFON, MICHELLE
Address: 6984 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 331413206 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHELLE HALFON

PSD

02/09/2005

Electronic Signature of Signing Officer or Director

Date