

2006 FOR PROFIT CORPORATION REINSTATEMENT

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FILED
06 FEB 10 AM 11:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V57132 1. Entity Name AVENTURA HOME DECOR, INC.			
Principal Place of Business 17100 W DIXIE HWY NORTH MIAMI BEACH, FL 33160 US		Mailing Address 17100 W DIXIE HWY NORTH MIAMI BEACH, FL 33160 US	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State Zip Country		City & State Zip Country	
4. FEI Number 65-0353652		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COHEN, DANIEL 17138 W. DIXIE HIGHWAY DIXIE PLAZA N. MIAMI BEACH, FL 33160		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE _____ <small>(NOTE: Registered Agent signature required when reinstating)</small>	
FILE NOW!!! FEE IS \$900.00			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP COHEN, DANIEL 17100 W. DIXIE HWY. NORTH MIAMI BEACH, FL 33160	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <div style="text-align: center; font-size: 1.5em; font-weight: bold;">REINSTATEMENT</div> <div style="text-align: center;"> FEB 14 2006 700066132627 02/17/06--01030--002 ***300.00 </div>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exceptions contained 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 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 attachment with an address, with all other like empowered.			
SIGNATURE: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date _____ Daytime Phone # _____	

ps 2/22

Aventura Home Decor, Inc.

17100 West Dixie Highway - North Miami Beach, FL 33160

Tel: (305) 945-6304 - Fax: (305) 945-5303

Certified Mail-Return receipt requested

January 23rd, 2006

Division of Corporations,

P.O. Box 6327,

Tallahassee, Fl. 32314

To whom it may concern:

Re: Document # V57132 - Entity name: Aventura Home Decor, Inc.

Please be advised that, to the best of my knowledge, no "notice" to submit for renewal were received by this company. Therefore, please find enclosed a check in the amount of \$150.00 made payable to Florida Department of State for reinstatement of Aventura Home Decor. Inc.

Thank you for your assistance in this matter.

Sincerely,



Daniel Cohen