

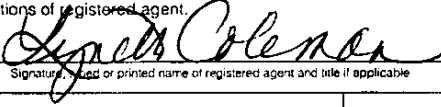
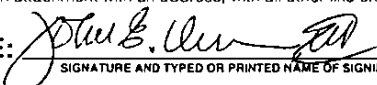


2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # F94000002905 1. Entity Name EXCELLENCE IN MOTIVATION, INC.						FILED 05 JUN 29 PM 1:50 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 6 NORTH MAIN ST., STE. 370 DAYTON, OH 45402			Mailing Address 6 NORTH MAIN ST., STE. 370 DAYTON, OH 45402			 REINSTATEMENT 04-05	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.					
City & State		City & State					
Zip	Country	Zip	4. FEI Number 31-1387432		<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>		5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST., STE. 105 TALLAHASSEE, FL 32301				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>			Lynette Coleman as its agent		6-3-05 <small>DATE</small>		
FILE NOW!!! FEE IS \$900.00							
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	<i>Chairman/Director</i> <input type="checkbox"/> Delete THOMAS, JARRETT N 1300 BRITTANY HILLS DR. DAYTON, OH 45459			TITLE <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition 800056526098 06/27/05--01004--018 **\$900.00		
TITLE <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	<i>Secretary</i> <input type="checkbox"/> Delete SEBALY, JON 31 WALNUT LANE DAYTON, OH 45419			TITLE <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	<i>Chief Financial Officer</i> <input type="checkbox"/> Delete KERNAN, JOHN E 124 ACACUA DRIVE DAYTON, OH 45409			TITLE <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	<i>President</i> <input type="checkbox"/> Delete MILLER, ROBERT 2873 CIRCLEWOOD LANE SPRING VALLEY, OH 45370			TITLE <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	<input type="checkbox"/> Delete			TITLE <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	<input type="checkbox"/> Delete			TITLE <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby 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 attachment with an address, with all other like empowered.							
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			JOHN E. KERNAN III		06/27/05 <small>Date</small>		937.222.2900 <small>Daytime Phone #</small>