2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000048398 1. Entity Name						FILED					
WALDEN	& HALL INVES	STMENT GRO	DUP, INC.				ae Al	IC 18 PH	1:55	5 -	
Principal Plac 3389 SHERII HOLLYWOOD	DAN ST #225	•		Aailing Address 3389 SHERIDAN ST #225 HOLLYWOOD, FL 33021			SECHE INKY OF STATE TALLAHASSEE, FLORIDA				
2. Principal P	lace of Business FARRAE	iut st.	3. Mailing Address 2316 FARE	2316 FARRAGUT St.							
Suite, Apt.	#, etc.		Suite, Apt. #, etc.	, , , , , , , , , , , , , , , , , , , ,		07182005	REIN-P	CR2E09	3 (6/04)	24.0	
City & State	unwood	1. FL	City & State #0/14	Hollywood, FL			26-75	90315		pplied For at Applicable	
Zip 33	020 Count	USA	Zip 33020	Country U.	SA	5. Certificate	of Status Desired		3.75 Add e Required		
	6. Name and Add	ress of Current R	egistered Agent	Name		7. Name and	Address of New	Registered Age	nt		
	ANTONIO RIDAN ST #225 OOD, FL 33021				dress (I	P.O."Box"Numb	er is Not Acceptal	ole)			
				23	16	KARA	AGUT	STREET FL	Zip Code	33020	
	named entity submits ions of registered age		the purpose of changing its r	egistered office or r	register	ed Agent, or bo	th, in the State of	Florida. I am farr	iliar with,	and accept	
3IGIVATO(LL)	Signature, typed or printed no	ame of registered agent ar	d title if applicable. (NOTE:	Registered Agent signate	ure requir	red when reinstating)	DATE			
FII	LE NOWIII FEE	IS \$300.00						with s. 607.19 d not receive th			
10.		OFFICERS AND D		11.		ADDITIONS	CHANGES TO O	FICERS AND DI	RECTORS	S IN 11	
TITLE NAME	WALDE	ニケノオニー	Delete	TITLE :		76	ไปประเ		Change	Addition	
STREET ADDRESS CITY-ST-ZIP	2316 F	ARKAGU	7 STREET 33020	STREET ADDRESS CITY-ST-ZIP		07/28	/050105(/050105(J005 *	*300.(DO -	
TITLE NAME	OFFICE HALL.	CARTHA	CTOR Delete	TITLE NAME] Change	Addition	
STREET ADDRESS CITY-ST-ZIP	2106	RODMAN	STREET 33020	STREET ADDRESS CITY-ST-ZIP							
TITLE NAME	7	,	☐ Delete	TITLE NAME					Change	Addition	
STREET ADDRESS CITY-ST-ZIA	! · -			STREET ADDRESS CITY-ST-7IP				_		-	
TITLE NAME			☐ Delete	TITLE NAME					Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP				STREET ADDRESS CITY-ST-ZIP							
TITLE NAME			☐ Defete	TITLE NAME		····			Change	Addition	
STREET ADDRESS CITY-ST-ZIP				STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	Addition	
indicated of the cor	on this report or supporation or the receiv or on an attachment	plemental report is er or trustee empor with an address, w	his filing does not qualify for rue and accurate and that m wered to execute this report a fith all other like empowered.	y signature shall ha is required by Chap ANTON	ive the s oter 607	same legal effe	ct as if made under es; and that my na	er oath; that I am me appears in B	an officer	or director	