

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000056406

FILED
Sep 28, 2005
Secretary of State

Entity Name: FOREXTREND, INC

Current Principal Place of Business:

301 CLEMATIS STREET, SUITE 3000
WEST PALM BEACH, FL 33401

New Principal Place of Business:

8 ELGIN LANE
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

301 CLEMATIS STREET, SUITE 3000
WEST PALM BEACH, FL 33401

New Mailing Address:

8 ELGIN LANE
PALM BEACH GARDENS, FL 33418

FEI Number: 03-0544226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHMIDT, PAUL
301 CLEMATIS STREET, SUITE 3000
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

SCHMIDT, PAUL
8 ELGIN LANE
PALM BEACH GARDENS, FL 33418 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: PAUL SCHMIDT

09/28/2005

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: MD () Delete
Name: SCHMIDT, PAUL
Address: 301 CLEMATIS STREET, SUITE 3000
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD (X) Change () Addition
Name: SCHMIDT, PAUL
Address: 8 ELGIN LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: PAUL SCHMIDT

MD

09/28/2005

Electronic Signature of Signing Officer or Director

Date