

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000096913

FILED
Dec 09, 2009
Secretary of State

Entity Name: CHALLENGENET INCORPORATED

Current Principal Place of Business:

8135 SOUTH MILITARY TRAIL
SUITE 103 -- 160
BOYNTON BEACH, FL 33436

New Principal Place of Business:

Current Mailing Address:

8135 SOUTH MILITARY TRAIL
SUITE 103 -- 160
BOYNTON BEACH, FL 33436

New Mailing Address:

FEI Number: 84-1695161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZDANOWICZ, MICHAEL S
8135 SOUTH MILITARY TRAIL
SUITE 103 -- 160
BOYNTON BEACH, FL 33436 US

Name and Address of New Registered Agent:

ZDANOWICZ, MICHAEL S
6742 FOREST HILL BLVD.
SUITE 298
WEST PALM BEACH, FL 33413 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: MICHAEL S. ZDANOWICZ

12/09/2009

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: P () Delete
Name: TRAVIS, JAMES
Address: 8135 SOUTH MILITARY TRAIL SUITE 103 -- 160
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP () Delete
Name: ZDANOWICZ, MICHAEL S
Address: 8135 SOUTH MILITARY TRAIL SUITE 103 -- 160
City-St-Zip: BOYNTON BEACH, FL 33436

Title: ST () Delete
Name: GALLO-TRAVIS, MARLENE
Address: 8135 SOUTH MILITARY TRAIL SUITE 103 -- 160
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: ZDANOWICZ, MICHAEL S
Address: 6742 FOREST HILL BLVD. SUITE 298
City-St-Zip: WEST PALM BEACH, FL 33413

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MICHAEL S. ZDANOWICZ

VP

12/09/2009

Electronic Signature of Signing Officer or Director

Date