

2006 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 13, 2006
Secretary of State**

DOCUMENT# P05000104942

Entity Name: OH MY GODARD GALLERIES FRANCHISE, INC.

Current Principal Place of Business:

719 DUVAL STREET
KEY WEST, MONROE COUNTY, FL 33040

New Principal Place of Business:

Current Mailing Address:

177 CASSIA WAY
STE B112
HENDERSON, NV 89014

New Mailing Address:

FEI Number: 20-2767600 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAIWAIOLE, LAHELA M
719 DUVAL STREET
KEY WEST, MONROE COUNTY, FL 33040 US

Name and Address of New Registered Agent:

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: LAHELA M WAIWAIOLE

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: SMITH, DAVID G
Address: 177 CASSIA WAY STE B112
City-St-Zip: HENDERSON, NV 89014

Title: VP () Delete
Name: GODARD, MICHAEL
Address: 177 CASSIA WAY STE B112
City-St-Zip: HENDERSON, NV 89014

Title: SEC () Delete
Name: WAIWAIOLE, LAHELA M
Address: 177 CASSIA WAY STE B112
City-St-Zip: HENDERSON, NV 89014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LAHELA WAIWAIOLE

Electronic Signature of Signing Officer or Director

GM

10/13/2006

Date