2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F00000001597

1-2715 BRISTOL CIRCLE

OAKVILLE, ON L6H 6X5 CA

Address: City-St-Zip:

Entity Name: IT XCHANGE CORP.

FILED Dec 09, 2009 Secretary of State

| y rea | |)L 001(1 . | | | |
|---|--|--|---|---|--|
| Current Principal Place of Business: | | | New Principal Pla | New Principal Place of Business: | |
| | M HARBOR BLVI | o | 9241 GLOBE CEN | TER DR | |
| UNIT C PALM HAF | RBOR, FL 34683 | 3 US | 100 MORRISVILLE, NV | ['] 27560 NC | |
| Current Mailing Address: | | | New Mailing Add | New Mailing Address: | |
| 2138 PALM HARBOR BLVD | | | | 9241 GLOBE CENTER DR | |
| UNIT C PALM HAF | RBOR, FL 34683 | B US | 100 MORRISVILLE, NV | ⁷ 27560 NC | |
| FEI Number | : 56-2028738 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Addres | Name and Address of New Registered Agent: | |
| UNIT C | ROBERT M HARBOR BLVI RBOR, FL 34683 | | 808 WELLINGTON | CORTEZ, JOHN MR 808 WELLINGTON DR CLEARWATER, FL 33764 US | |
| | e named entity su e of Florida. | bmits this statement for the p | ourpose of changing its regist | ered office or registered agent, or both, | |
| SIGNATURE: JOHN CORTEZ | | | | 12/09/2009 | |
| | Electronic | Signature of Registered Age | ent | Date | |
| | | 2)(b), F.S., the corporation did no rust Fund Contribution (). | ot receive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHAI | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | PD () D MCFARLANE, JEI 155 PRESTONIA MORRISVILLE, N | FFREY MR PLACE | Title: Name: Address: City-St-Zip: | () Change() Addition | |
| Title: Name: Address: City-St-Zip: | SD () D MCFARLANE, LES 34 BUGGEY LANI AJAX, ON L1S 48 | S MR E | Title: Name: Address: City-St-Zip: | () Change() Addition | |
| Title: Name: | CFO () D SUTHERLAND, G | | Title: Name: | () Change () Addition | |

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.

Address:

City-St-Zip:

SIGNATURE: GORDON SUTHERLAND CFO 12/09/2009