

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F02000003477

FILED
Sep 22, 2005
Secretary of State

Entity Name: COGSDALE SOFTWARE CORPORATION

Current Principal Place of Business:

14 MACALEER DR
SUITE 5
CHARLOTTETOWN, PEI CANADA, C1E- A1

Current Mailing Address:

14 MACALEER DR
SUITE 5
CHARLOTTETOWN, PEI CANADA, C1E- A1

FEI Number: 98-0363498

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIPPY, DAREN L
2548 BLAIRSTONE PINES DRIVE
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

14 MACALEER DR
SUITE 5
CHARLOTTETOWN, CANADA, PE C1E2A1

New Mailing Address:

14 MACALEER DR
SUITE 5
CHARLOTTETOWN, CANADA, PE C1E2 A1

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: DAREN SHIPPY

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: VP () Delete
Name: PERRY, DAVID
Address: 8 GAMMA COURT
City-St-Zip: OTTAWA ONTARIO CANADA, K2J3W8

Title: VP () Delete
Name: SHAW, DUNCAN
Address: 848 LANVIEW DRIVE
City-St-Zip: LASALLE, ONTARIO CANADA, N9J1N1

Title: DCEO () Delete
Name: SIKIC, ZELJKO
Address: 7454 BLACK WALNUT TRAIL
City-St-Zip: MISSISSAUGA, ONTARIO, L5N 8D2

Title: T (X) Delete
Name: GAUDIN, TODD
Address: 96 WESTRIDGE CRESCENT
City-St-Zip: CHAROLTTETOWN, C1A 6Z2

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: PERRY, DAVID
Address: 8 GAMMA COURT
City-St-Zip: OTTAWA ONTARIO CANADA, ON K2J3W8

Title: VP (X) Change () Addition
Name: SHAW, DUNCAN
Address: 58 GEORGE SAMUEL DR
City-St-Zip: HAMMONDS PLAINS, NS B4B1L9

Title: CFO (X) Change () Addition
Name: GAUDIN, TODD
Address: 96 WESTRIDGE CRESCENT
City-St-Zip: CHAROLTTETOWN, PE C1A 6Z2

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 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: TODD GAUDIN

CFO

09/22/2005

Electronic Signature of Signing Officer or Director

Date