2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F02000004698

Entity Name: ESOX, INC.

FILED Sep 26, 2005 Secretary of State

,	2007, 11				
Current Principal Place of Business:			New Principal Place of Business:		
855 MORG VENICE, FI	AN TOWNE \ L 34292	VAY			
Current Mailing Address:			New Mailing Address:		
	AN TOWNE \	WAY			
22A VENICE, FI	L 34292				
FEI Number:	41-1784154	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
T&H COMF 200 CAPRI VENICE, FI	PTROLLERS, ISLES BLVD. L 34292 U	, STE 2			
The above in the State		submits this statement for the p	ourpose of changing its registered	I office or registered agent, or both,	
SIGNATUR	E: BY RONA	ALD P. HOGARTH, PRESIDEN	IT		
	Electror	nic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CPS (KASMIRSKI, JA 855 MORGAN VENICE, FL 34	TOWNE WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JAMES M. KASMIRSKI PRES 09/26/2005