2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 03, 2005
Secretary of State

DOCUMENT# F03000002026

Entity Name: NEW MARKET ALLIANCE, INC.

Current Principal Place of Business:

1000 MARKET STREET, BLDG. 1, SUITE 202
PORTSMOUTH, NH 03801

New Principal Place of Business:

1000 MARKET STREET
BLDG. 1, SUITE 202
PORTSMOUTH, NH 03801

Current Mailing Address:

1000 MARKET STREET, BLDG. 1, SUITE 202
PORTSMOUTH, NH 03801

New Mailing Address:

1000 MARKET STREET
BLDG. 1, SUITE 202
PORTSMOUTH, NH 03801

FEI Number: 02-0469907 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: TRACI HOUCK

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: PT ( ) Delete
Name: OLIVIERO, JIM
Address: 115 GOLF VIEW DR.
City-St-Zip: LITTLE EGG HARBOR, NJ 08087

Title: D ( ) Delete
Name: OLIVIERO, JAMES
Address: 115 GOLF VIEW DR.
City-St-Zip: LITTLE EGG HARBOR, NJ 08087

Title: S ( ) Delete
Name: KEANE, THOMAS M
Address: 1000 MARKET STREET, BLDG. 1, SUITE 202
City-St-Zip: PORTSMOUTH, NH 03801

Title: D ( ) Delete
Name: HARVEY, MICHAEL
Address: P.O. BOX 477
City-St-Zip: PORTSMOUTH, NH 038020477

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition
Name: OLIVIERO, JAMES
Address: 115 GOLF VIEW DR.
City-St-Zip: LITTLE EGG HARBOR, NJ 08087

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 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: THOMAS M. KEANE S 10/03/2005

Electronic Signature of Signing Officer or Director Date