2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000002700

Entity Name: CBD DEVELOPMENT GROUP, INC.

FILED Sep 12, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

803 BIRCHFIELD DR 721 FRONT STREET

MT. LAUREL, NJ 08054 APT. 230 CELEBRATION, FL 34747 US

Current Mailing Address: New Mailing Address:

127 NORTH MAGNOLIA AVENUE 721 FRONT STREET

ORLANDO, FL 32801 APT. 230

CELEBRATION, FL 34747 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WARONKER, DAVID A
127 NORTH MAGNOLIA AVE
WARONKER, DAVID A
721 FRONT STREET

ORLANDO, FL 32801 US APT. 230 CELEBRATION, FL 34747 US

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: DAVID A. WARONKER 09/12/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete Title: DPS (X) Change () Addition

Name:WARONKER, DAVID AName:WARONKER, DAVID AAddress:127 NORTH MAGNOLIA AVENUEAddress:721 FRONT STREET, APT. 230

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: CELEBRATION, FL 34747 US

Title: DVP () Delete Title: DV (X) Change () Addition Name: CANTWELL, JEFFREY Name: WARONKER, RUTH

Address: 803 BIRCHFIELD DR Address: 721 FRONT STREET, APT. 230
City-St-Zip: MT. LAUREL, NJ 08054 City-St-Zip: CELEBRATION, FL 34747 US

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: DAVID A. WARONKER DPS 09/12/2005