

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000004263

Entity Name: ALLIED VISION GROUP, INC.

FILED
Oct 21, 2004
Secretary of State

Current Principal Place of Business:

8 ROBBIE COURT
MORGANVILLE, NJ 07751

New Principal Place of Business:

5350 N.W. 35TH AVENUE
FORT LAUDERDALE, FL 33309

Current Mailing Address:

8 ROBBIE COURT
MORGANVILLE, NJ 07751

New Mailing Address:

5350 N.W. 35TH AVENUE
FORT LAUDERDALE, FL 33309

FEI Number: 22-2983482

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONROY, THOMAS ESQ
CONROY, COLEMAN & HAZZARD PA
2640 GOLDEN GATE PKWY., STE. 115
NAPLES, FL 34105 US

Name and Address of New Registered Agent:

PEREZ, LAUREN ESQ
SANDLER, TRAVIS & ROSENBERG
5200 BLUE LAGOON DR - SUITE # 600
MIAMI, FL 33126 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: LAUREN PEREZ

10/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TARDELL, ROBERT
Address: 8 ROBBIE COURT
City-St-Zip: MORGANVILLE, NJ 07751

Title: VP () Delete
Name: SALAND, JULES
Address: 6483 HIGHCROFT DR.
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TARDELL, ROBERT
Address: 3740 S. OCEAN BLVD # 1101
City-St-Zip: HIGHLAND BEACH, FL 33487

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: LAUREN PEREZ

MS

10/21/2004

Electronic Signature of Signing Officer or Director

Date