

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000001947

FILED
Sep 17, 2007
Secretary of State

Entity Name: FUSION REALTY CAPITAL CORP.

Current Principal Place of Business:

207 ORANGE AVE.
STE F
FT. PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

207 ORANGE AVE.
STE F
FT. PIERCE, FL 34950

New Mailing Address:

207 ORANGE AVE.
STE C
FT. PIERCE, FL 34950

FEI Number: 20-3497071

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ST ROSE, JOSEPH
207 ORANGE AVE.
STE F
FT. PIERCE, FL 34950 US

Name and Address of New Registered Agent:

ST ROSE, JOSEPH
207 ORANGE AVE.
STE C
FT. PIERCE, FL 34950 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: JOSEPH ST. ROSE

09/17/2007

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: PS () Delete
Name: ST ROSE, JOSEPH
Address: 844 POP TILTON PLACE
City-St-Zip: JENSEN BEACH, FL 34957

Title: VP () Delete
Name: ST ROSE, LAVERN
Address: 844 POP TILTON PLACE
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: ST ROSE, JOSEPH
Address: 207 ORANGE AVE., SUITE C
City-St-Zip: FORT PIERCE, FL 34950

Title: VP (X) Change () Addition
Name: ST ROSE, LAVERN
Address: 207 ORANGE AVE., SUITE C
City-St-Zip: FORT PIERCE, FL 34950

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOSEPH ST. ROSE

DIR

09/17/2007

Electronic Signature of Signing Officer or Director

Date