2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 08, 2007
Secretary of State

DOCUMENT# F06000003841

Entity Name: INFILAW CORPORATION

Current Principal Place of Business:

1100 5TH AVENUE SOUTH
SUITE 401
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

1100 5TH AVENUE SOUTH
SUITE 401
NAPLES, FL 34102

New Mailing Address:

FEI Number: 20-0226552 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

THOMPSON, SCOTT CFO
1100 5TH AVENUE SOUTH
SUITE 401
NAPLES, FL 34102 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: SCOTT THOMPSON 10/08/2007
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: P ( ) Delete
Name: INATOME, RICK
Address: 1100 5TH AVENUE SOUTH #401
City-St-Zip: NAPLES, FL 34102

Title: T ( ) Delete
Name: APPLEBAUM, MARC
Address: 1100 5TH AVENUE SOUTH #401
City-St-Zip: NAPLES, FL 34102

Title: S ( ) Delete
Name: STONE, DENNIS
Address: 1100 5TH AVENUE SOUTH #401
City-St-Zip: NAPLES, FL 34102

Title: D ( ) Delete
Name: TASLITZ, STEVEN M
Address: 1100 5TH AVENUE SOUTH #401
City-St-Zip: NAPLES, FL 34102

Title: D ( ) Delete
Name: FEDERICO, RICHARD
Address: 1100 5TH AVENUE SOUTH #401
City-St-Zip: NAPLES, FL 34102

Title: D ( ) Delete
Name: WIPPMAN, TOM D
Address: 1100 5TH AVENUE SOUTH #401
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: THOMPSON, SCOTT
Address: 1100 5TH AVENUE SOUTH #401
City-St-Zip: NAPLES, FL 34102

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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: SCOTT THOMPSON CFO 10/08/2007
Electronic Signature of Signing Officer or Director Date