2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 16, 2007
Secretary of State

DOCUMENT# F06000003947

Entity Name: PAS TECHNOLOGIES INC.

Current Principal Place of Business:

1834 ATLANTIC STREET
NORTH KANSAS CITY, MO 64116

New Principal Place of Business:

1234 ATLANTIC STREET
NORTH KANSAS CITY, MO 64116

Current Mailing Address:

1834 ATLANTIC STREET
NORTH KANSAS CITY, MO 64116

New Mailing Address:

1234 ATLANTIC STREET
NORTH KANSAS CITY, MO 64116

FEI Number: 20-4772714 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: JEANINE REYNOLDS - AS ITS AGENT

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: PSTD ( ) Delete
Name: CONESE, JR., EUGENE P
Address: 1834 ATLANTIC STREET
City-St-Zip: NORTH KANSAS CITY, MO 64116

Title: VST ( ) Delete
Name: BURGER, THOMAS A
Address: 1834 ATLANTIC STREET
City-St-Zip: NORTH KANSAS CITY, MO 64116

Title: V ( ) Delete
Name: ANDREWS, JAMES
Address: 1834 ATLANTIC STREET
City-St-Zip: NORTH KANSAS CITY, MO 64116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: CONESE, JR., EUGENE P
Address: 1234 ATLANTIC STREET
City-St-Zip: NORTH KANSAS CITY, MO 64116

Title: VST (X) Change ( ) Addition
Name: BURGER, THOMAS A
Address: 1234 ATLANTIC STREET
City-St-Zip: NORTH KANSAS CITY, MO 64116

Title: V (X) Change ( ) Addition
Name: ANDREWS, JAMES
Address: 1234 ATLANTIC STREET
City-St-Zip: NORTH KANSAS CITY, MO 64116

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: WILLIAM LEFTRIDGE ACCT 10/16/2007

Electronic Signature of Signing Officer or Director Date