2009 FOR PROFIT CORPORATION REINSTATEMENT

REINSTATEMENT									
DOCU									
1. Entity Nam			•./				FILED		
	• • • • • •				TEST OF		09 MAY -6 AM	11:12	
Principal Place of Business Mailing Address							SECRETARY OF	STATE	
2800 E. BROADWAY, STE. C, PMB 701. 2800 E. BROADWAY, STE HOUSTON, TX 77075 HOUSTON, TX 77075				4B 701		• • • •	TALLAHASSEE, F		
1	Place of Business - No P.O. Box #	3. Mailing Address 2800 E BROOWAY				1844 1847 1844 1854 1844 1844 1844 1844 1844 1844 1844 1844 1844 1844 1844 184			
Suite, Apt.	*. elc 50	Suite, Apt. #, etc. C-70				04292009	NIREMATE MEAST		7
City & Stat	かいろ	City & State EAR LAND				4. FEI Number 37-1507 270 Applied For Not Applicable			
Zip プ>	C Country 77034	Zip TX	Countr	×581		5, Certificate		8.75 Addi	
•			l.	7. Name and	Address of New Registered A	gent			
BURT, ROBERT C. JR.									
4362 AVALON BLVD.				Street Ac	ddress (P	O. Box Numb	er is Not Acceptable)		
MILTON, FL 32583									
			ſ	City			FL	Zip Code	;
8. 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. I am familiar with, and accept									
the obligations of registered agent									
SIGNATURE									
FILE NOW!!! FEE IS \$300.00							In accordance with s. 607. corporation did not receive		
10.	OFFICERS AND D	 IRECTORS	11.			ADDITIONS	CHANGES TO OFFICERS AND	DIRECTORS	IN 11
TITLE	DPS	☐ Delete	TITLE					Change	Addition
NAME STREET ADDRESS	STERN, KEVIN 8030 HALL RD.		NAME STREET	T ADDRESS	138	550 yulf fuy #250			
CITY-ST-ZIP	HOUSTON, TX 77075			CITY-ST-ZIP		10uston, Tx 77034,			
TITLE	DVPT PINSON, RANDY	☐ Delete	TITLE		りい			Change	Addition
NAME STREET ADDRESS	11917 NE 56 CIR., STE. B			I ADDRESS					
CITY-ST-ZIP	VANCOUVER, WA 98682		CITY-S	ST-ZIP		-			
TITLE N am e	ROSSELL HANSSIT	☐ Delete	TITLE NAME		DT	SBITT	RUSSELL	Change	Addition
STREET ADDRESS	F332			T ADDRESS	1382	50 446	RUSSELL FFUY, #250	•	1
CITY-ST-ZIP	i .	Delete	CITY-S	SI - ZIP	KO	<u>us (3~</u>	, Tx 77034	☐ Change	Addition
NAME	Dal	☐ Délete	NAME					ondings	
STREET ADORESS CITY-ST-ZIP	U3111		STREET CITY-S	T ADDRESS ST-ZIP					
TITLE	 	☐ Delete	THTLE					Change	Addition
NAME STREET ADDRESS	,		NAME STREET	T ADDRESS		50	01555311 3 0901021007 *	}5	.
CITY-ST-ZIP			CITY-5			U3/ U5/		*300.00	
TITLE		☐ Delete	TITLE					☐ Change	☐ Addition
NAME STREET ADDRESS			NAME STREET	I ADDRESS					
CITY-ST-ZIP			CITY-S			<u> </u>	F. 1 0 4 14 11 11 11		
12. Thereby certify that the information supplied with his filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indirected on this report or supplied with his filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indirected on this report or supplied with his filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information									

2. Thereby certify that the information supplied with Nis ming coes not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is the end acceptate and that my signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation or the receiver of trustee empoweded to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an analysis, with all other like engowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/09 281922 4412 Daytime Phone 1