

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F11000000553

Entity Name: EDB SOLUTIONS INC.

**FILED**  
**Jun 12, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

1280 IROQUOIS AVE  
STE 404  
NAPERVILLE, IL 60563

**New Principal Place of Business:**

**Current Mailing Address:**

1280 IROQUOIS AVE  
STE 404  
NAPERVILLE, IL 60563

**New Mailing Address:**

FEI Number: 26-3985270

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

HOWARD, RON  
980 N. FEDERAL HIGHWAY  
SUITE 224  
BOCA RATON, FL 33432 US

**Name and Address of New Registered Agent:**

HOWARD, RON  
950 PENINSULA CORPORATE CIR.  
SUITE 3007  
BOCA RATON, FL 33487 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: RON HOWARD

06/12/2013

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CPD  
Name: TRIVEDI, ALKA  
Address: 24 W 501 SURF COURT  
City-St-Zip: NAPERVILLE, IL 60540

Title: VC  
Name: TRIVEDI, ALKA  
Address: 24 W 501 SURF COURT  
City-St-Zip: NAPERVILLE, IL 60540

I hereby 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 all other like empowered.

SIGNATURE: ALKA TRIVEDI

CPD

06/12/2013

Electronic Signature of Signing Officer or Director

Date