2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F94000005188

Entity Name: MONITRONICS INTERNATIONAL, INC.

FILED Oct 21, 2004 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
		WAY SUITE 821				
Current Mailing Address:			New Mailing Address:			
		WAY SUITE 821				
FEI Number:	74-2719343	FEI Number Applied For ()	FEI Number Not Applica	ble () Certificate of Status Desired (X)		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US						
The above in the State		ibmits this statement for the pur	rpose of changing its	registered office or registered agent, or both,		
SIGNATUR	!E:					
	Electronic	Signature of Registered Agen	t	Date		
		2)(b), F.S., the corporation did not r Trust Fund Contribution ().	eceive the prior notice.			
OFFICERS AND DIRECTORS:			ADDITIONS/	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	WESNER, BLAIN	Delete E F D TOWER, 114 WEST 7TH STREET	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D () E JENKS, STEVE 85 MERRIMAC S BOSTON, MA	Delete	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	DEANGELIS, KEI	Delete NNETH) TOWER 114 W 7TH ST	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	HULL, JIM	Delete NS FREEWAY SUITE 821	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SHERMAN, ROBI	Delete ERT NS FREEWAY SUITE 821	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	HEDRICK, STEP	Delete HEN M NS FREEWAY, SUITE 821	Title: Name: Address: City-St-Zip:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEVE HEDRICK VT 10/21/2004