2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 20, 2004
Secretary of State

DOCUMENT# F99000003025

Entity Name: NLP ENTERPRISES, INC.

Current Principal Place of Business:

14661 SO. HARRELL'S FERRY ROAD
BATON ROUGE, LA 70816

New Principal Place of Business:

Current Mailing Address:

14661 SO. HARRELL'S FERRY ROAD
BATON ROUGE, LA 70816

New Mailing Address:

FEI Number: 72-1113076 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: PARKER, NORMAN L
Address: 6947 GOVERNMENT ST.
City-St-Zip: BATON ROUGE, LA 70806

Title: EVPD ( ) Delete
Name: LEMOINE, DAVID C
Address: 735 CORA DR.
City-St-Zip: BATON ROUGE, LA 70815

Title: STD ( ) Delete
Name: PARKER, SHARON L
Address: 6947 GOVERNMENT ST.
City-St-Zip: BATON ROUGE, LA 70806

Title: SD ( ) Delete
Name: POPULUS, KELLY P
Address: 22864 GREEN ACRES
City-St-Zip: DENHAM SPRINGS, LA 70726

Title: VD (X) Delete
Name: BOURQUE, CADE G
Address: 13627 GREENVIEW AVENUE
City-St-Zip: BATON ROUGE, LA 70816

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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

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: KELLY P. POPULUS SD 10/20/2004

Electronic Signature of Signing Officer or Director — Date