

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# G19442

Entity Name: MYRO, INC.

FILED
Jan 04, 2005
Secretary of State

Current Principal Place of Business:

1070 EGRET LAKE WAY
MELBOURNE, FL 32940 US

New Principal Place of Business:

4770 CHARDONNAY DRIVE
ROCKLEDGE, FL 32955 US

Current Mailing Address:

POB 411089
MELBOURNE, FL 32940 US

New Mailing Address:

4770 CHARDONNAY DRIVE
ROCKLEDGE, FL 32955 US

FEI Number: 59-2289681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DESROSIENS, SHEILA
1070 EGRET LAKE WAY
MELBOURNE, FL 32940 US

Name and Address of New Registered Agent:

DESROSIENS, SHEILA G
5805 N. WICKHAM ROAD
MELBOURNE, FL 32940 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: SHEILA G. DESROSIERS

01/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SALAS, MYRIAM,
Address: 1070 EGRET LAKE WAY
City-St-Zip: MELBOURNE, FL 32940

Title: SVP () Delete
Name: DESROSIERS, SHEILA G,
Address: 1070 EGRET LAKE WAY
City-St-Zip: MELBOURNE, FL 32970

Title: PT () Delete
Name: SALAS, MYRIAM
Address: 1070 E GRET LAKEWAY
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SALAS, MYRIAM,
Address: 4770 CHARDONNAY DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: SVP (X) Change () Addition
Name: DESROSIERS, SHEILA G,
Address: 5805 N. WICKHAM ROAD
City-St-Zip: MELBOURNE, FL 32940

Title: PT (X) Change () Addition
Name: SALAS, MYRIAM
Address: 4770 CHARDONNAY DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

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: SHEILA G. DESROSIERS

VP

01/04/2005

Electronic Signature of Signing Officer or Director

Date