2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 25, 2004
Secretary of State

DOCUMENT# G94379

Entity Name: TOBIASZ ENTERPRISE, INC.

Current Principal Place of Business:

1504 NE JENSEN BEACH BLVD
JENSEN BEACH, FL 34957

New Principal Place of Business:

1504 NE JENSEN BEACH BLVD.
JENSEN BEACH, FL 34957

Current Mailing Address:

4595 NE INDIAN RIVER DR.
P.O. BOX 1288
JENSEN BEACH, FL 34957

New Mailing Address:

P.O. BOX 1288
JENSEN BEACH, FL 34958

FEI Number: 59-2432943 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TOBIASZ, DANIEL R.
4595 NE INDIAN RIVER DR
JENSEN BEACH, FL 34957 US

Name and Address of New Registered Agent:

TOBIASZ, DANIEL R.
2458 SE ISAAC ROAD
PORT ST LUCIE, FL 34952 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: DANIEL R. TOBIASZ 10/25/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: ST ( ) Delete
Name: TOBIASZ, ANN,
Address: 4595 NE INDIAN RIVER DR
City-St-Zip: JENSEN BEACH, FL

Title: PD ( ) Delete
Name: TOBIASZ, DANIEL,
Address: 4595 NE INDIAN RIVER DR
City-St-Zip: JENSEN BEACH, FL

Title: VP ( ) Delete
Name: TOBIASZ, JOSEPH,
Address: 1011 E. 9TH ST.
City-St-Zip: STUART, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change ( ) Addition
Name: TOBIASZ, ANN,
Address: 2458 SE ISAAC ROAD
City-St-Zip: PORT ST LUCIE, FL 34952

Title: PD (X) Change ( ) Addition
Name: TOBIASZ, DANIEL,
Address: 2458 SE ISAAC ROAD
City-St-Zip: PORT ST LUCIE, FL 34952

Title: VP (X) Change ( ) Addition
Name: TOBIASZ, JOSEPH,
Address: 718 SE HIBISCUS ROAD
City-St-Zip: STUART, FL 34996

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: ANN T TOBIASZ ST 10/25/2004
Electronic Signature of Signing Officer or Director Date