

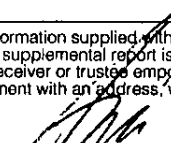


**FILED**  
**May 02, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # H92604</b> 1. Entity Name <b>FINAM CORPORATION</b>				<b>May 02, 2008 08:00</b> <b>Secretary of State</b>		
Principal Place of Business <b>3250 N. 37TH STREET HOLLYWOOD, FL 33021</b>		Mailing Address <b>3250 N. 37TH STREET HOLLYWOOD, FL 33021</b>				
<b>DO NOT WRITE IN THIS SPACE</b>						
				<b>04282008 No Chg-P CR2E034 (11/05)</b>		
		4. FEI Number <b>59-2617502</b>		Applied For Not Applicable		
		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required		
6. Name and Address of Current Registered Agent <b>FINDER, AMI 3250 N. 37TH STREET HOLLYWOOD, FL 33021</b>				<b>DO NOT WRITE IN THIS SPACE</b>		
8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>						
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees		
10. OFFICERS AND DIRECTORS		<div>U000000945606 05/30/08-80016-007 150.00</div> <b>DO NOT WRITE IN THIS SPACE</b>				
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DP FINDER, DORIS 3250 N. 37TH STREET HOLLYWOOD, FL 33021					
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DV FINDER, AMI 3250 N. 37TH STREET HOLLYWOOD, FL 33021					
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TITLE NAME STREET ADDRESS CITY- ST- ZIP						
TITLE NAME STREET ADDRESS CITY- ST- ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						
SIGNATURE: 		<b>4/28/08</b> <b>3844810030</b>				
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #				