

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# J09545

FILED
Oct 09, 2006
Secretary of State

Entity Name: MERCHANTS SECURITY EXCHANGE, INC.

Current Principal Place of Business:

134 SOUTH TAMPA STREET
TAMPA, FL 336025354 US

New Principal Place of Business:

Current Mailing Address:

134 SOUTH TAMPA STREET
TAMPA, FL 336025354 US

New Mailing Address:

FEI Number: 59-0356700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, PETER JR
134 SOUTH TAMPA STREET
TAMPA, FL 33602 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: PETER RODRIGUEZ, JR.

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: RODRIGUEZ, PETER JR
Address: 134 S TAMPA ST
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: BOOS, ROBERT
Address: 19321-C US HWY 19 NORTH
City-St-Zip: CLEARWATER, FL

Title: VP () Delete
Name: KRONE, ROBERT
Address: 134 SOUTH TAMPA STREET
City-St-Zip: MIAMI, FL

Title: T () Delete
Name: MCMULLEN, JOHN S
Address: 134 S TAMPA ST
City-St-Zip: TAMPA, FL

Title: S () Delete
Name: MEADOR, CAROL JO
Address: 134 S TAMPA
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: TOMLIN, HOLLY
Address: 134 S. TAMPA STREET
City-St-Zip: TAMPA, FL 33602

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:

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 Chapter 119, 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: CAROL JO MEADOR

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10/09/2006

Electronic Signature of Signing Officer or Director

Date