## 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# J10407

Entity Name: TAD METALS INC. SOLITH EAST

FILED Oct 10, 2005 Secretary of State

		17/20, 1140., 0001112/101			
Current P	rincipal Plac	e of Business:	New Principal Place of Business:		
4130 N.CA P.O.BOX JACKSON		209			
Current N	lailing Addre	ss:	New Mailing Address:		
4130 N.CA P.O.BOX JACKSON		209			
FEI Number	: 59-2664969	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and	d Address of	Current Registered Agent:	Name and Address of	New Registered Agent:	
1201 HAY TALLAHA The above	S STREET SSEE, FL 323		purpose of changing its registered	office or registered agent, or both,	
		OLUBED.			
SIGNATURE: NOT REQUIRED  Electronic Signature of Registered Age			ent	t Date	
		93(2)(b), F.S., the corporation did n g Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	AGARINI, SAN	STREET, SUITE 2446	Title: ( Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V ( WOLFE, KENN 4130 N CANAL JACKSONVILL	. ST	Title: ( Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PERFETTI, JO	STREET, SUITE 2446	Title: ( Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title:	V (>	() Delete	Title: (	( ) Change( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN PERFETTI S 10/10/2005

CASSERLY, WILLIAM

NEW YORK, NY 10165

60 EAST 42ND STREET, SUITE 2446

Name:

Address:

City-St-Zip: