2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# J40250

Entity Name: AMACORP, INC.

FILED Mar 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1600 S. HIATUS RD 4581 WESTON ROAD

PEMBROKE PINES, FL 33025 #165

WESTON, FL 33331

Current Mailing Address: New Mailing Address:

1600 S. HIATUS RD 4581 WESTON ROAD PEMBROKE PINES, FL 33025 #165

WESTON, FL 33331

FEI Number: 59-2740969 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AMATANGELO, DENNIS E.

1600 S. HIATUS RD.

PEMBROKE PINES, FL 33025 US

AMATANGELO, DENNIS E.

4581 WESTON ROAD

#165

EMBROKE PINES, FL 33025 US #165 WESTON, FL 33331 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: DENNIS AMATANGELO 03/17/2009

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 AMATANGELO, DENNIS
 Name:
 AMATANGELO, DENNIS

 Address:
 1600 S. HIATUS RD.
 Address:
 4581 WESTON ROAD

 City-St-Zip:
 PEMBROKE PINES, FL
 City-St-Zip:
 WESTON, FL 33331

Title: TD () Delete Title: () Change () Addition
Name: AMATANGELO GUIDO Name:

 Name:
 AMATANGELO, GUIDO,
 Name:

 Address:
 1341 W FAIRWAY RD.
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL
 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 AMATANGELO, NANCY
 Name:
 AMATANGELO, NANCY

 Address:
 1600 S. HIATUS ROAD
 Address:
 4581 WESTON ROAD

 City-St-Zip:
 PEMBROKE PINES, FL 33025
 City-St-Zip:
 WESTON, FL 33331

I hereby certify that the information supplied with this filing does not qualify 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: DENNIS AMATANGELO PD 03/17/2009