

**2009 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Feb 12, 2009  
Secretary of State**

DOCUMENT# L52856

Entity Name: MEDIAIDERS, INC.

**Current Principal Place of Business:**

2455 E SUNRISE BLVD  
SUITE MEZZANINE  
FT LAUDERDALE, FL 33304 US

**New Principal Place of Business:**

**Current Mailing Address:**

2455 E SUNRISE BLVD  
SUITE MEZZANINE  
FT LAUDERDALE, FL 33304 US

**New Mailing Address:**

FEI Number: 65-0179644      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

HARDIN, DAVID  
500 E. BROWARD BLVD  
SUITE 1950  
FT. LAUD, FL 33394 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: DAVID HARDIN

\_\_\_\_\_  
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: D ( ) Delete  
Name: BARON, GARY,  
Address: 2455 E SUNRISE BLVD  
City-St-Zip: FT LAUDERDALE, FL 33304 US

Title: D ( ) Delete  
Name: BILLINGTON, TAYLOR  
Address: 2455 E SUNRISE BLVD  
City-St-Zip: FT LAUDERDALE, FL 33304 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: GARY BARON

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

MR.

02/12/2009

\_\_\_\_\_  
Date