



FILED
Apr 18, 2008 08:00 AM
Secretary of State

DOCUMENT # M06994 1. Entity Name FNG INTERNATIONAL, INC.							
Principal Place of Business 21370 HARROW COURT BOCA RATON, FL 33433		Mailing Address 21370 HARROW COURT BOCA RATON, FL 33433					
<div style="text-align: center;">DO NOT WRITE IN THIS SPACE</div>							
		<div style="text-align: center;"></div> <div>04162008 No Chg-P CR2E034 (11/05)</div> <table border="1"><tr><td>4. FEI Number 59-2458953</td><td>Applied For Not Applicable</td></tr><tr><td>5. Certificate of Status Desired <input type="checkbox"/></td><td>\$8.75 Additional Fee Required</td></tr></table>		4. FEI Number 59-2458953	Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required						
6. Name and Address of Current Registered Agent GRAJWER, FLORENCE N 21370 HARROW COURT BOCA RATON, FL 33433		<div style="text-align: center;">DO NOT WRITE IN THIS SPACE</div>					
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)</small>							
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees					
		DATE 05/02/08 100000905149 05/02/08-80006-023 150.00					
10. OFFICERS AND DIRECTORS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP		P GRAJWER, FLORENCE N. 21370 HARROW COURT BOCA RATON, FL 33433					
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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: <u><i>Florence N. Grajwer</i></u> FLORENCE N. GRAJWER 4/16/08 5612188620 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>							