

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000000504

FILED
Mar 26, 2007
Secretary of State

Entity Name: RECOVER ALL INC.

Current Principal Place of Business:

524 MLK STREET SOUTH
ST PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

524 MLK STREET SOUTH
ST PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 13-4286327 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BELL, CYNTHIA
6689 23RD CIRCLE N
SAINT PETERSBURG, FL 33702 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: CYNTHIA BELLOFFICER/DIRECTOR

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BELL, L.S
Address: 6689 23RD CIRCLE N
City-St-Zip: ST PETERSBURG, FL 33702

Title: D () Delete
Name: BELL, CYNTHIA
Address: 6689 23RD CIRCLE N
City-St-Zip: ST PETERSBURG, FL 33702

Title: D () Delete
Name: TUCKER, JIM
Address: 350 4TH ST S UNIT 2
City-St-Zip: SAINT PETERSBURG, FL 33701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: JOHNSON, KRIS
Address: 2315 1/2 1ST AVE. N.
City-St-Zip: SAINT PETERSBURG, FL 33713D

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: L.S.BELL

D

03/26/2007

Electronic Signature of Signing Officer or Director

Date