

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000005148

FILED
Oct 07, 2005
Secretary of State

Entity Name: X ' CEPTIONAL PATH .INC

Current Principal Place of Business:

808 SE 18TH TERRACE
GAINESVILLE, FL 32641 US

New Principal Place of Business:

Current Mailing Address:

808 SE 18TH TERRACE
GAINESVILLE, FL 32641 US

New Mailing Address:

FEI Number: 42-1629692 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

PERRY, TAI' MANI T
808 SE 18TH TERRACE
GAINESVILLE, FL 32641 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: TAIMANI PERRY

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: PERRY, TAI' MANI T
Address: 808 SE 18TH TERRACE
City-St-Zip: GAINESVILLE, FL 32641 US

Title: P () Delete
Name: PERRY, SHA'PARIS
Address: 1016 SE 18TH TERRACE
City-St-Zip: GAINESVILLE, FL 32641 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TAIMANIPERRY

CEO

10/07/2005

Electronic Signature of Signing Officer or Director

Date