

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000005853

FILED
Jun 07, 2008
Secretary of State

Entity Name: PRESMEN, INC.

Current Principal Place of Business:

11272 PINES BLVD.
PEMBROKE PINES, FL 33025

New Principal Place of Business:

Current Mailing Address:

11272 PINES BLVD.
PEMBROKE PINES, FL 33025

New Mailing Address:

FEI Number: 20-5206415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MYERS, NIGEL
6640 SW 109TH ST.
PINECREST, FL 33156 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: NIGEL C. MYERS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MYERS, NIGEL
Address: 6640 SW 109TH ST.
City-St-Zip: PINECREST, FL 33156

Title: D () Delete
Name: SHAND, STEVE
Address: 6783 MARIPOSA CIRCLE EAST
City-St-Zip: PEMBROKE PINES, FL 33331

Title: D () Delete
Name: SEBRO, BRENT
Address: 14766 GRANC COVE DR.
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

SIGNATURE: NIGEL C. MYERS

D

06/07/2008

Electronic Signature of Signing Officer or Director

Date