2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N9400005306

Entity Name: PROJECT TEAMWORK, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

9725 N NEW RIVER CANAL RD STE 424 PLANTATION, FL 33324

New Mailing Address: Current Mailing Address:

PO BOX 120764 9725 N NEW RIVER CANAL RD FORT LAUDERDALE, FL 33312 STE 424 PLANTATION, FL 33324

FEI Number: 65-0526275 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MORGAN, CHARLES O JR. 9725 N NEW RIVER CANAL RD # 424 PLANTATION, FL 33324 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: CHARLES O MORGAN JR

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition BEHNKEN, B.J. BEHNKEN, BJ Name: Name: 9725 N NEW RIVER CANAL RD # 424 Address: 9725 N NEW RIVER CANAL RD # 424 Address: PLANTATION, FL 33324 City-St-Zip: PLANTATION, FL 33324 City-St-Zip: Title: CBOD () Delete Title: CBOD (X) Change () Addition WATSON, TOMMY REV Name: ALMARIO, TONY Name: Address: 9725 N NEW RIVER CANAL RD # 424 Address: 9725 N NEW RIVER CANAL RD # 424 City-St-Zip: PLANTATION, FL 33324 City-St-Zip: PLANTATION, FL 33324 Title: () Delete Title: () Change () Addition MOORE-SWABY, GAIL Name: Name: 9725 N NEW RIVER CANAL RD # 424 Address: Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: Title: () Delete Title: () Change (X) Addition

Name: Name: GONZALEZ, MARTHA Address: Address: 9725 N NEW RIVER CANAL RD #424 City-St-Zip: City-St-Zip: PLANTATION, FL 33324

Title: () Delete Title: () Change (X) Addition ENGLERT, JOAN Name: Name:

9725 N NEW RIVER CANAL RD #424 Address: Address: City-St-Zip:

City-St-Zip: PLANTATION, FL 33324

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: BJ BEHNKEN PD 04/30/2009