

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000002357

FILED
Apr 20, 2008
Secretary of State

Entity Name: FIBER OPTIC SPECIALISTS, INC.

Current Principal Place of Business:

1556 BLUEJAY RD.
CLIMAX SPRINGS, MO 65324

New Principal Place of Business:

4720 SALISBURY ROAD
JACKSONVILLE, FL 32256

Current Mailing Address:

1556 BLUEJAY RD.
CLIMAX SPRINGS, MO 65324

New Mailing Address:

P.O. BOX 74076
ATT: W. BYRD
LOS ANGELES, CA 90004

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MERRITT, DANIEL B JR
224 NORTH BROAD STREET
BROOKSVILLE, FL 34601 US

Name and Address of New Registered Agent:

BROWN CONSULTING
224 NORTH BROAD STREET
BROOKSVILLE, FL 34601 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: ALICIA BROWN

04/20/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: CARROLL, KENNETH
Address: 1556 BLUEJAY RD.
City-St-Zip: CLIMAX SPRINGS, MO 65324

Title: VPS (X) Delete
Name: CARROLL, JOANNE
Address: 1556 BLUEJAY RD.
City-St-Zip: CLIMAX SPRINGS, MO 65324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TURNER, THOMAS
Address: 1441 DARTMOUTH AVE
City-St-Zip: BALTIMORE, MD 21234

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

SIGNATURE: THOMAS TURNER

P

04/20/2008

Electronic Signature of Signing Officer or Director

Date