

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000003022

Entity Name: DIVERSEVISION INC

FILED  
May 15, 2009  
Secretary of State

## Current Principal Place of Business:

25539 RISEN STAR DR  
WESLEY CHAPEL, FL 33544

## New Principal Place of Business:

610 W LAS OLAS BLVD  
SUITE 1212  
FT. LAUDERDALE, FL 33312

## Current Mailing Address:

P.O. BOX 46273  
TAMPA, FL 33647

## New Mailing Address:

P.O. BOX 253  
LUTZ, FL 33548

FEI Number: 59-3691149

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORRIS, JULIAN  
25539 RISEN STAR DR  
WESLEY CHAPEL, FL 33544 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: JULIAN MORRIS

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: P ( ) Delete  
Name: MORRIS, JULIAN  
Address: 25539 RISEN STAR DR  
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P ( ) Change (X) Addition  
Name: RENKOFF, JASON  
Address: 610 W LAS OLAS BLVD., SUITE 1212  
City-St-Zip: FT. LAUDERDALE, FL 33312

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: JULIAN MORRIS

P

05/15/2009

Electronic Signature of Signing Officer or Director

Date