

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000040266

Entity Name: PMAG, INC.

FILED
Sep 26, 2006
Secretary of State

Current Principal Place of Business:

1412 FOREST LAKES BLVD.
NAPLES, FL 34105

New Principal Place of Business:

1412 FOREST LAKES BLVD.
NAPLES, FL 34105 US

Current Mailing Address:

YOUTOWN BOOKS TWIN LIGHTS PUBLISHERS
568 9TH ST. S. #357
NAPLES, FL 34102

New Mailing Address:

1412 FOREST LAKES BLVD.
NAPLES, FL 34105 US

FEI Number: 59-3724541

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCGEE, PETER
1412 FOREST LAKES BLVD.
NAPLES, FL 34105 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: PETER MCGEE

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: MCGEE, PETER
Address: 1412 FOREST LAKES BLVD.
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCGEE, PETER
Address: 1412 FOREST LAKES BLVD.
City-St-Zip: NAPLES, FL 34105 US

I hereby certify that the information supplied with this filing does not qualify for the 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: PETER MCGEE

P

09/26/2006

Electronic Signature of Signing Officer or Director

Date