2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000062171

Entity Name: VALUE PROCESSING CENTER, INC.

FILED Oct 21, 2004 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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860 US HWY 1 STE 206 16610 69 TH ST N.

NORTH PALM BEACH, FL 33408 LOXAHATCHEE, FL 33470

Current Mailing Address: New Mailing Address:

16784 82ND RD N 16610 69 TH ST N.

LOXAHATCHEE, FL 33470 LOXAHATCHEE, FL 33470

FEI Number: 65-1115183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES, FL 33134 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:

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: PTD (X) Change () Addition

 Name:
 CANASTRARO, VICTOR M
 Name:
 CANASTRARO, VICTOR M

 Address:
 1020 CRYSTAL WAY UNIT P
 Address:
 16610 69 TH ST N.

 City-St-Zip:
 DELRAY BEACH, FL 33444
 City-St-Zip:
 LOXAHATCHEE, FL 33470

Title: SVD () Delete Title: SVD (X) Change () Addition

 Name:
 VANORDEN, DAWN M
 Name:
 VANORDEN, DAWN M

 Address:
 1020 CRYSTAL WAY UNIT P
 Address:
 16610 69 TH ST N.

 City-St-Zip:
 DELRAY BEACH, FL 33444
 City-St-Zip:
 LOXAHATCHEE, FL 33470

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: VICTOR CANASTRARO PRES 10/21/2004