

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000082537

**FILED**  
**Jul 26, 2006**  
**Secretary of State**

**Entity Name:** TREASURE EXPEDITIONS CORPORATION

**Current Principal Place of Business:**

8185 PALM GATE DRIVE  
BOYNTON BEACH, FL 33436

**New Principal Place of Business:**

2800 GIRALDA CIRCLE WEST  
APT 204  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

8185 PALM GATE DRIVE  
BOYNTON BEACH, FL 33436

**New Mailing Address:**

2800 GIRALDA CIRCLE WEST  
APT 204  
PALM BEACH GARDENS, FL 33410

FEI Number: 65-0663434

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

JOHNSON, ROBERT B  
8185 PALM GATE DRIVE  
BOYNTON BEACH, FL 33436 US

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

JOHNSON, ROBERT B  
2800 GIRALDA CIRCLE WEST  
APT 204  
PALM BEACH GARDENS, FL 33410 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: ROBERT B JOHNSON

07/26/2006

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: JOHNSON, ROBERT B  
Address: 8185 PALM GATE DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33436

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: JOHNSON, ROBERT B  
Address: 2800 GIRALDA CIRCLE WEST  
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: ROBERT B JOHNSON

PRES

07/26/2006

Electronic Signature of Signing Officer or Director

Date