

**2005 FOR PROFIT CORPORATION
REINSTATEMENT**

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FILED

05 DEC 23 AM 11:19

DOCUMENT # P01000094732					
1. Entity Name THE WEB MARKETING STUDIO INC.					
Principal Place of Business 9803 D BOCA GARDEN S CIRCLE N BOCA RATON, FL 33496			Mailing Address PO BOX 880303 BOCA RATON, FL 33488		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-1140634	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent CORPORATE CREATIONS NETWORK INC. 941 FOURTH STREET #200 MIAMI BEACH, FL 33139				7. Name and Address of New Registered Agent Name Corporation Service Company Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street City Tallahassee FL 32301	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Laura R. Dunlap</u> Laura R. Dunlap as its agent DATE 12/23/05					
FILE NOW! FEE IS \$150.00 After January 1, 2006, Fee will be \$300.00			In accordance with s. 807.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MONCRIEF, CAROL PO BOX 880303 BOCA RATON, FL 33488 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Carol Moncrief</u> Carol Moncrief SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE <u>12/22/05</u> (561) 883-9868 Date Daytime Phone #		

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Florida Department of State
Division of Corporations
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CORPORATION REINSTATEMENT

THE WEB MARKETING STUDIO INC.

Certificate of Status	0
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