

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000102944

Entity Name: ON-TIME FUNDRAISER INC.

FILED
Sep 17, 2007
Secretary of State

Current Principal Place of Business:

8190 WEST 26TH AVENUE
SUITE 102
MIAMI, FL 33016 US

Current Mailing Address:

8190 WEST 26TH AVENUE
SUITE 102
MIAMI, FL 33016 US

New Principal Place of Business:

12555 BISCAYNE BOULEVARD
#888
NORTH MIAMI, FL 33181 US

New Mailing Address:

12555 BISCAYNE BOULEVARD
#888
NORTH MIAMI, FL 33181

FEI Number: 65-1153450

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUARTE, EDGAR M
8190 WEST 26 AVENUE
MIAMI, FL 33016 US

Name and Address of New Registered Agent:

HORNBuckle, JOHN
12555 BISCAYNE BOULEVARD
#888
NORTH MIAMI, FL 33181 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: JOHN HORNBuckle

09/17/2007

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: PD () Delete
Name: DUARTE, EDGAR M
Address: 8190 WEST 26 AVENUE
City-St-Zip: MIAMI, FL 33016

Title: VD (X) Delete
Name: NEWTON, DEREK
Address: 8190 WEST 26 AVENUE
City-St-Zip: MIAMI, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HORNBuckle, JOHN
Address: 12555 BISCAYNE BOULEVARD
City-St-Zip: NORTH MIAMI, FL 33181 US

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

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: JOHN HORNBuckle

PD

09/17/2007

Electronic Signature of Signing Officer or Director

Date