

**2006 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 24, 2006  
Secretary of State**

DOCUMENT# P01000105272

Entity Name: BEDROCK TECHNOLOGIES, INC.

**Current Principal Place of Business:**

P.O. BOX 82  
CLEVERDALE, NY 12820

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 82  
CLEVERDALE, NY 12820

**New Mailing Address:**

FEI Number: 02-0580285      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

VALDES-FAULI CORPORATE SERVICES, INC.  
777 S. FLAGLER DRIVE, SUITE 500 EAST  
W. PALM BEACH, FL 33401      US

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

GY CORPORATE SERVICES, INC.  
777 S. FLAGLER DRIVE, SUITE 500 EAST  
W. PALM BEACH, FL 33401      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: GY CORPORATE SERVICES, INC.      10/24/2006  
\_\_\_\_\_  
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: DPST      ( ) Delete  
Name: GRANT, RALPH  
Address: P.O. BOX 82  
City-St-Zip: CLEVERDALE, NY 12820

Title: D      ( ) Delete  
Name: GRANT, DEBORAH  
Address: P.O. BOX 82  
City-St-Zip: CLEVERDALE, NY 12820

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

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

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

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: RALPH GRANT      P      10/24/2006  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date