

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000008058

Entity Name: COHEN SOD, INC.

FILED  
Oct 21, 2004  
Secretary of State

## Current Principal Place of Business:

PO BOX 1962  
BUNNELL, FL 32110

## New Principal Place of Business:

NOLAN ROAD  
SEVILLE, FL 32190

## Current Mailing Address:

PO BOX 1962  
BUNNELL, FL 32110

## New Mailing Address:

PO BOX 94  
SEVILLE, FL 32190

FEI Number: 90-0016358

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FINANCIAL FOUNDATIONS, INC.  
3150 SANDY RIDGE DRIVE  
CLEARWATER, FL 33761 US

## Name and Address of New Registered Agent:

COHEN, STEVEN PRES.  
P.O. BOX 94  
SEVILLE, FL 32190 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: STEVEN D. COHEN

10/21/2004

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: COHEN, STEVEN D  
Address: 660 HARPER ROAD  
City-St-Zip: PIERSON, FL 32180

Title: ST ( ) Delete  
Name: DORSON, MELISSA  
Address: PO BOX 1962  
City-St-Zip: BUNNELL, FL 32110

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: COHEN, STEVEN D  
Address: NOLAN ROAD  
City-St-Zip: SEVILLE, FL 32190

Title: ST (X) Change ( ) Addition  
Name: DOPSON, MELISSA  
Address: NOLAN ROAD  
City-St-Zip: SEVILLE, FL 32190

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: STEVEN D. COHEN

PRES

10/21/2004

Electronic Signature of Signing Officer or Director

Date