

2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000030655

Entity Name: EARTHFIRE USA, INC.

FILED
Oct 13, 2010
Secretary of State

Current Principal Place of Business:

2425 TAMIAMI TRAIL NORTH
SUITE 214
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

2425 TAMIAMI TRAIL NORTH
SUITE 214
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 04-3663518

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEE, KELLY R
2425 TAMIAMI TRAIL NORTH
SUITE 214
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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: KELLY R DEE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T
Name: MORGAN, JAMES R
Address: 2425 TAMIAMI TRAIL NO, STE 214
City-St-Zip: NAPLES, FL 34103

Title: D
Name: MORGAN, JAMES R
Address: 2425 TAMIAMI TRAIL NO, STE 214
City-St-Zip: NAPLES, FL 34103

Title: S
Name: MORGAN, JAMES R
Address: 2425 TAMIAMI TRAIL N, STE 214
City-St-Zip: NAPLES, FL 34103

Title: P
Name: MORGAN, JAMES R
Address: 2425 TAMIAMI TRAIL N. STE 214
City-St-Zip: NAPLES, FL 34103

Title: D
Name: MORGAN, JAMES R
Address: 2425 TAMIAMI TRAIL N. STE 214
City-St-Zip: NAPLES, FL 34103

Title: V
Name: MORGAN, JAMES R
Address: 2425 TAMIAMI TRAIL N. STE 214
City-St-Zip: NAPLES, FL 34103

I hereby 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 all other like empowered.

SIGNATURE: JAMES R MORGAN

P

10/13/2010

Electronic Signature of Signing Officer or Director

Date