2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000033743

KALL, RONALD

BOCA RATON, FL 33487

751 PARK OF COMMERCE DRIVE, SUITE 128

Name:

Address: City-St-Zip:

Entity Name: BOCA ENTERPRISE GROUP, INC.

FILED Oct 06, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 751 PARK OF COMMERCE DR, STE 128 BOCA RATON, FL 33487 **Current Mailing Address: New Mailing Address:** 751 PARK OF COMMERCE DR, STE 128 BOCA RATON, FL 33487 FEI Number: 04-3659906 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WEISS, DAVID 8751 W BROWARD BLVD, STE 209 PLANTATION, FL 33324 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: DAVID WEISS Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition PECHTER, JEFFREY S Name: Name: 751 PARK OF COMMERCE DRIVE, SUITE 128 Address: Address: City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: Title: Title: () Delete () Change () Addition HOFFMAN, ROBERT Name: Name: 751 PARK OF COMMERCE DRIVE, SUITE 128 Address: Address: BOCA RATON, FL 33487 City-St-Zip: City-St-Zip: Title: Title: MRS () Delete () Change () Addition PECHTER, LISA V Name: Name: 751 PARK OF COMMERCE DRIVE, SUITE 128 Address: Address: BOCA RATON, FL 33487 City-St-Zip: City-St-Zip: Title: MR. () Delete Title: () Change () Addition WEISS, DAVID Name: Name: Address: 8751 W. BROWARD BLVD., SUITE 209 Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: Title: Title: MR. () Delete () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: LISA V. PECHTER MRS. 10/06/2005