2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000061538

Entity Name: SIGMA ENTERPRISES, INC.

FILED Oct 12, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
4400 CM/ 25TH TEDDACE	101 OF OND DUACE CUITE 201 C

4428 S.W. 35TH TERRACE 101 SE 2ND PLACE, SUITE 201-C GAINESVILLE, FL 32608 GAINESVILLE, FL 32601

Current Mailing Address: New Mailing Address:

4428 S.W. 35TH TERRACE 101 SE 2ND PLACE, SUITE 201-C GAINESVILLE, FL 32608 GAINESVILLE, FL 32601

FEI Number: 90-0044700 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

WINNIE, ELIZABETH A 3520 N.W. 43RD STREET GAINESVILLE, FL 32606 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: ELIZABETH A. WINNIE

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: PRES (X) Change () Addition

Name: MAY, LEE Name: MAY, LEE

 Address:
 2045 ROCKY POINT ROAD
 Address:
 3903 SW 89TH DRIVE

 City-St-Zip:
 GAINESVILLE, FL 32608
 City-St-Zip:
 GAINESVILLE, FL 32608

Title: D (X) Delete Title: () Change () Addition

 Name:
 FLAGG, N.DAVID
 Name:

 Address:
 5810 N.W. 97TH STREET
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32653
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 MAY, JACK
 Name:

 Address:
 2045 ROCKY POINT ROAD
 Address:

Address: 2045 ROCKY POINT ROAD Address:
City-St-Zip: GAINESVILLE, FL 32608 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: LEE MAY PRES 10/12/2006