

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000064184

Entity Name: MCBAIN ENTERPRISES,INC.

FILED
Apr 15, 2005
Secretary of State

Current Principal Place of Business:

2187 PLAYING OTTER COVE
KISSIMMEE, FL 33837

New Principal Place of Business:

2817 PLAYING OTTER COVE
KISSIMMEE, FL 34747

Current Mailing Address:

2187 PLAYING OTTER COVE
KISSIMMEE, FL 33837

New Mailing Address:

2817 PLAYING OTTER COVE
KISSIMMEE, FL 34747

FEI Number: 01-0719759

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCBAIN, JAMES
2187 PLAYING OTTER COVE
KISSIMMEE, FL 34747 US

Name and Address of New Registered Agent:

MCBAIN, JAMES
2817 PLAYING OTTER COVE
KISSIMMEE, FL 34747 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: JAMES MCBAIN

04/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCBAIN, JAMES
Address: 2187 PLAYING OTTER COVE
City-St-Zip: KISSIMMEE, FL 33837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MCBAIN, JAMES
Address: 2817 PLAYING OTTER COVE
City-St-Zip: KISSIMMEE, FL 34747

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: JAMES MCBAIN

MR.

04/15/2005

Electronic Signature of Signing Officer or Director

Date