2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000081954

Entity Name: SOURCE FINANCIAL & INVESTMENT INC.

FILED Dec 18, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5400 S. UNIVERSITY DR. 19451 SHERIDAN STREET

01 3301

DAVIE, FL 33024 PEMBROKE PINES, FL 33332

Current Mailing Address: New Mailing Address:

5400 S. UNIVERSITY DR. 19451 SHERIDAN STREET

301 3301 AVIE, FL 33328 PEMBROKE PINES, FL 33332

FEI Number: 82-0556238 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:

GRANT, GEORGE GRANT, GEORGE

5400 S. UNIVERSITY DR. 19451 SHERIDAN STREET

DAVIE, FL 33328 US PEMBROKE PINES, FL 33332 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: GEORGE GRANT 12/18/2008

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

 Name:
 GRANT, GEORGE
 Name:
 GRANT, GEORGE

 Address:
 16374 SEGOVIA CIRCLE SOUTH
 Address:
 19451 SHERIDAN STREET

 City-St-Zip:
 FORT LAUDERDALE, FL 33331
 City-St-Zip:
 PEMBROKE PINES, FL 33332

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

 Name:
 MEIKLE, MARK
 Name:

 Address:
 5320 SW 130TH TERRACE
 Address:

 City-St-Zip:
 MIRAMAR, FL 33027
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: GEORGE GRANT P 12/18/2008