## 2004 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P02000109088

Address:

City-St-Zip:

4731 N MICHIGAN AVENUE

MIAMI BEACH, FL 33140 US

FILED Dec 09, 2004 Secretary of State

Entity Nar	ne: FIRST UN	IIVERSAL NETWORK INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
4731 N. MICHIGAN AVENUE MIAMI BEACH, FL 33140 US			300 41ST ST SUITE 202-A MIAMI BEACH, FL 33	3141 US	
Current M	ailing Addres	s:	New Mailing Addres	New Mailing Address:	
	CHIGAN AVEN ACH, FL 33140		127 ROUTE 59 MONSEY, NY 10952	US	
FEI Number:	14-1850340	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
SEGELMAN, PAUL 4731 N. MICHIGAN AVENUE MIAMI BEACH, FL 33140 US			PTALIS, DAVID 1970 MICHIGAN AVE MIAMAI BEACH, FL		
The above in the State		ubmits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: DAVID PTALIS				12/09/2004	
	Electron	ic Signature of Registered Age	ent	Date	
		(2)(b), F.S., the corporation did no Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VP (X) SEGELMAN, PA 4731 N. MICHIG MIAIMI BEACH,	AN AVENUE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	P () PESSIN, BRIAN 127 ROUTE 59 MONSEY, NY 1	Delete 0952 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	SEC (X) ESTHER, SEGE	Delete LMAN	Title: Name:	( ) 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.

Address:

City-St-Zip:

SIGNATURE: BRIAN E. PESSIN PRES 12/09/2004