2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000114436

Entity Name: MEBEINGME INC.

FILED Nov 24, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5000 WILLOW LEAF
SARASOTA, FL 34241 US

Current Mailing Address: New Mailing Address:

5000 WILLOW LEAF
SARASOTA, FL 34241 US
8019 RED EAGLE DRIVE
TALLAHASSEE, FL 32312 US

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

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

MARTIN, PATRICIA ANN
5000 WILLOW LEAF 8019 RED EAGLE DRIVE
SARASOTA, FL 34241 US TALLAHASSEE, FL 32312 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: PATRICIA ANN MARTIN 11/24/2004

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:

 Name:
 MARTIN, PATRICIA
 Name:
 MARTIN, PATRICIA

 Address:
 5000 WILLOW LEAF
 Address:
 8019 RED EAGLE DRIVE

 City-St-Zip:
 SARASOTA, FL 34241 US
 City-St-Zip:
 TALLAHASSEE, FL 32312 US

 Name:
 MCGHAN, PATRICK
 Name:

 Address:
 5000 WILLOW LEAF WAY
 Address:

 City-St-Zip:
 SARASOTA, FL 34241 US
 City-St-Zip:

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

 Name:
 GILLAM, PATRICIA
 Name:

 Address:
 451 STONEHENGE CIRCLE
 Address:

 City-St-Zip:
 ROCKLEDGE, FL 32955 US
 City-St-Zip:

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: PATRICIA ANN MARTIN P 11/24/2004