

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000005635

**FILED**  
**Mar 17, 2005**  
**Secretary of State**

**Entity Name:** COMPUTER NETWORK TECHNOLOGIES & CONSULTING, INC.

**Current Principal Place of Business:**

4005 S.W. 52ND AVENUE  
PEMBROKE PARK, FL 33023

**New Principal Place of Business:**

6970 TAFT STREET  
HOLLYWOOD, FL 33024

**Current Mailing Address:**

4005 S.W. 52ND AVENUE  
PEMBROKE PARK, FL 33023

**New Mailing Address:**

6970 TAFT STREET  
HOLLYWOOD, FL 33024

**FEI Number:** 32-0055561

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ACCUPAY SERVICES CORP.  
4801 SOUTH UNIVERSITY DRIVE  
SUITE 3000  
DAVIE, FL 33328 US

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

SMITH, NADENE  
6970 TAFT STREET  
HOLLYWOOD, FL 33024 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: NADENE SMITH

03/17/2005

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:**

Title: D ( ) Delete  
Name: SMITH, NADENE  
Address: 4005 S.W. 52ND AVENUE  
City-St-Zip: PEMBROKE PARK, FL 33023

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: SMITH, NADENE  
Address: 6970 TAFT STREET  
City-St-Zip: HOLLYWOOD, FL 33024

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: NADENE SMITH

D

03/17/2005

Electronic Signature of Signing Officer or Director

Date