2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 20, 2004
Secretary of State

DOCUMENT# P03000009635

Entity Name: SCIREITH RESEARCH & DEVELOPMENT COMPANY

Current Principal Place of Business:

335 DESOTO DRIVE
MIAMI SPRINGS,, FL 33166

New Principal Place of Business:

624 SOUTH DRIVE
MIAMI SPRINGS,, FL 33166

Current Mailing Address:

P.O. BOX 981
BOCA RATON,, FL 33429

New Mailing Address:

114 ALBATROSS STREET
MIAMI SPRINGS, FL 33166

FEI Number: 35-2193930 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PINZON, WILFRED BSC
335 DESOTO DRIVE
MIAMI SPRINGS, FL 33166 US

Name and Address of New Registered Agent:

PINZON, WILFRED MSC
624 SOUTH DRIVE
MIAMI SPRINGS, FL 33166 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: WILFRED PINZON 12/20/2004
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:

Title: CEO ( ) Delete
Name: PINZON, WILFRED BSC
Address: P.O. BOX 981
City-St-Zip: BOCA RATON, FL 33429

Title: VP ( ) Delete
Name: ENRIQUEZ, NEINER RN
Address: 335 DESOTO DRIVE
City-St-Zip: MIAMI SPRINGS,, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition
Name: PINZON, WILFRED MSC
Address: 624 SOUTH DRIVE
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: ( ) Change ( ) Addition
Name:
Address:
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: WILFRED PINZON MSC 12/20/2004
Electronic Signature of Signing Officer or Director Date