2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000020209

Entity Name: PROPERTY MASTERS MANAGEMENT, INC.

FILED Nov 12, 2007 Secretary of State

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

1784 N CONGRESS AVE ST 103 WESTPALM BEACH, FL 33409

Current Mailing Address: New Mailing Address:

1784 N CONGRESS AVE ST 103 WESTPALM BEACH, FL 33409

FEI Number: 59-4741894 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:

REGINALD, COMPERE

1068 BENOIST FARM RD 203

WESTPALMBEACH, FL 33411 US

LEBRUN, MITCHEL

1068 BENOIST FARM RD 203

WESTPALMBEACH, FL 33411 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: LEBRUN MITCHEL 11/12/2007

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: D () Delete Title: D (X) Change () Addition Name: COMPERE, REGINALD Name: MITCHEL, LEBRUN

 Name:
 COMPERE, REGINALD
 Name:
 MITCHEL, LEBRUN

 Address:
 1068 BENOIST FARM RD 203
 Address:
 1068 BENOIST FARM RD 203

 City-St-Zip:
 WEST PALM BEACH, FL 33411
 City-St-Zip:
 WEST PALM BEACH, FL 33411

Name: COMPERE, J Name: SANON, COMPERE

Address: 1068 BENOIST FARM RD 203
City-St-Zip: WESTPALMBEACH, FL 33411
Address: 1068 BENOIST FARM RD 203
City-St-Zip: WESTPALMBEACH, FL 33411

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: SANON COMPERE MGM 11/12/2007