2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000028746

Entity Name: AMERICAN DEBT NEGOTIATORS, INC.

FILED Oct 08, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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11555 HERON BAY BLVD #200 23123 STATE RD 7 CORAL SPRINGS, FL 33076 US

250

BOCA RATON, FL 33428 US

Current Mailing Address: New Mailing Address:

11555 HERON BAY BLVD #200 23123 STATE RD 7

CORAL SPRINGS, FL 33076 US 250

BOCA RATON, FL 33428 US

FEI Number: 45-0507271 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BARNEA, RAN D BARNEA, RAN D 11555 HERON BAY BLVD #200 23123 STATE RD 7

CORAL SPRINGS, FL 33076 250 BOCA RATON, FL 33428 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: RAN D BARNEA 10/08/2007

> 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: PD() Delete Title: (X) Change () Addition

BARNEA, RAN D BARNEA, RAN D Name: Name: 11555 HERON BAY BLVD #200 23123 STATE RD 7 #250 Address: Address: City-St-Zip: CORAL SPRINGS, FL 33076 US City-St-Zip: BOCA RATON, FL 33428 US

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

Name: POST, DANIEL T Name: POST, DANIEL T 11555 HERON BAY BLVD #200 23123 STATE RD 7 #250 Address: Address: CORAL SPRINGS, FL 33076 US BOCA RATON, FL 33428 US City-St-Zip: City-St-Zip:

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

POST, RICHARD Name: POST, RICHARD Name: 11555 HERON BAY BLVD #200 23123 STATE RD 7 #250 Address: Address: City-St-Zip: CORAL SPRINGS, FL 33076 US City-St-Zip: BOCA RATON, FL 33428 US

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: RAN D BARNEA PD 10/08/2007