2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000037228

City-St-Zip:

CAPE CORAL, FL 33991

Entity Name: REACH MEDIA ADVERTISING INC.

FILED Sep 24, 2007 Secretary of State

| _many man | mer relation | WEBI/T/BVERTION 40, II VO. | | | |
|---|--|--|---|---|--|
| Current P | rincipal Place | of Business: | New Principal Place o | New Principal Place of Business: | |
| 6326 PRESIDENTIAL CT STE 5 | | | 6226 PRESIDENTIAL (STE B | СТ | |
| FT MYERS, FL 33919 | | | FT MYERS, FL 33919 | FT MYERS, FL 33919 | |
| Current M | lailing Addres | ss: | New Mailing Address | New Mailing Address: | |
| 6326 PRESIDENTIAL CT SUITE 5 FT MYERS, FL 33919 | | | 6226 PRESIDENTIAL CT SUITE B FT MYERS, FL 33919 | | |
| FEI Number: | : 45-0509059 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| LANGE, M 1312 SW 1 CAPE COI | | 1 US | | | |
| | named entity s e of Florida. | submits this statement for the p | ourpose of changing its registered | d office or registered agent, or both, | |
| SIGNATUR | RE: MARTHA | T LANGE | | | |
| | Electror | nic Signature of Registered Age | ent | Date | |
| | | 3(2)(b), F.S., the corporation did no g Trust Fund Contribution (). | ot receive the prior notice. | | |
| OFFICERS | S AND DIREC | TORS: | ADDITIONS/CHANGE | S TO OFFICERS AND DIRECTORS | |
| Title: Name: Address: City-St-Zip: | PD () LANGE, MARTH 1312 SW 1ST S CAPE CORAL, | ST | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VD () LANGE, GEOFI 1213 SW 1 ST CAPE CORAL, | | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: | BELCHAMBER |) Delete , AARON M ATHER CIRCLE | Title: Name: Address: | () Change () Addition | |

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.

City-St-Zip:

SIGNATURE: MARTHA T LANGE PD 09/24/2007