2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000047358

Entity Name: LINDERCOVER SURVEILLANCE INC

6901 ENVIRON BLVD., APT. 3F

LAUDERHILL, FL 33319

Address: City-St-Zip: FILED Oct 05, 2009 Secretary of State

Entity Nai	me: UNDER	COVER SURVEILLANCE, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
101 N. ST/ STE #117	ATE RD 7				
	E, FL 33063	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
101 N. ST	ATE RD 7				
STE #117 MARGATE	E, FL 33063	US			
FEI Number:	: 20-0007657	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
6574 N ST 242	ER, SCOTT F RD 7 T CREEK, FL				
	named entity e of Florida.	submits this statement for the p	urpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE: SCOTT	SCHNEIDER			
	Electro	nic Signature of Registered Age	nt	Date	
		93(2)(b), F.S., the corporation did nong Trust Fund Contribution ().	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SCHNEIDER, 6574 NORTH) Delete SCOTT STATE RD 7 # 242 REEK, FL 33073 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PRESTANO, Î 2170 NE 51S		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	CFO (SCHWAB, CH) Delete ARLES	Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: SCOTT SCHNEIDER PRES 10/05/2009