

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000053142

Entity Name: PRESSAGE, INC.

FILED
Dec 15, 2008
Secretary of State

Current Principal Place of Business:

7851 JOHNSON STREET
205
PEMBROKE PINES, FL 33024

Current Mailing Address:

P.O. BOX 2276
HALLANDALE BEACH, FL 33008

New Principal Place of Business:

19221 NE 10 AVENUE
207
MIAMI, FL 33179

New Mailing Address:

19221 NE 10 AVENUE
207
MIAMI, FL 33179

FEI Number: 54-2110597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRESSAGE, NADIA M
7851 JOHNSON STREET
205
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

PRESSAGE, NADIA M
19221 NE 10 AVENUE
207
MIAMI, FL 33179 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: NADIA M. PRESSAGE

12/15/2008

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: P () Delete
Name: PRESSAGE, NADIA M
Address: 7851 JOHNSON STREET
City-St-Zip: PEMBROKE PINES, FL 33024

Title: S () Delete
Name: PRESSAGE, NADIA M
Address: 7851 JOHNSON STREET
City-St-Zip: PEMBROKE PINES, FL 33024

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PRESSAGE, NADIA M
Address: 19221 NE 10 AVENUE STE 207
City-St-Zip: MIAMI, FL 33179

Title: VP T (X) Change () Addition
Name: MALEBRANCHE, RHOMIE C
Address: 19221 NE 10 AVENUE STE 207
City-St-Zip: MIAMI, FL 33179

Title: D S () Change (X) Addition
Name: PENA, ASHLEY L
Address: 19221 NE 10 AVENUE STE 207
City-St-Zip: MIAMI, FL 33179

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: NADIA M. PRESSAGE

P

12/15/2008

Electronic Signature of Signing Officer or Director

Date