

**2004 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 20, 2004  
Secretary of State**

DOCUMENT# P03000069689

Entity Name: MICHAEL CANALIZO, PA

**Current Principal Place of Business:**

PO BOX 181  
OLDSMAR, FL 34677

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 181  
OLDSMAR, FL 34677

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

CANALIZO, MICHAEL  
3587 INDIGO POND DR  
PALM HARBOR, FL 34685    US

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

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: \_\_\_\_\_

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:                      D                      ( ) Delete  
Name:                      CANALIZO, MICHAEL  
Address:                      3587 INDIGO POND DR  
City-St-Zip:                      PALM HARBOR, FL 34685

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:                      D                      (X) Change ( ) Addition  
Name:                      CANALIZO, MICHAEL  
Address:                      3587 INDIGO POND DR  
City-St-Zip:                      PALM HARBOR, FL 34685

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL CANALIZO

PRES

10/20/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date