

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000094558

FILED  
Sep 26, 2005  
Secretary of State

**Entity Name:** ULTIMATE DISPLAYS & GRAPHICS, INC.

**Current Principal Place of Business:**

150 NW 96TH AVE., #109  
PEMBROKE PINES, FL 33024

**New Principal Place of Business:**

15651 SW 40 STREET  
MIRAMAR, FL 33027

**Current Mailing Address:**

150 NW 96TH AVE., #109  
PEMBROKE PINES, FL 33024

**New Mailing Address:**

15651 SW 40 STREET  
MIRAMAR, FL 33027

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KENDRICK, TRENEICE  
150 NW 96TH AVE., #109  
PEMBROKE PINES, FL 33024 US

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

WALLACE, DWAYNE  
15651 SW 40 STREET  
MIRAMAR, FL 33027 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: DWAYNE WALLACE

09/26/2005

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: KENDRICK, TRENEICE  
Address: 150 NW 96TH AVE., #109  
City-St-Zip: PEMBROKE PINES, FL 33024

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

Title: D (X) Change ( ) Addition  
Name: DWAYNE, WALLACE  
Address: 15651 SW 40 STREET  
City-St-Zip: MIRAMAR, FL 33027

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: DWAYNE WALLACE

PRES

09/26/2005

Electronic Signature of Signing Officer or Director

Date