2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000100282

Entity Name: NOW I SEE AND ASSOCIATES INC.

FILED Jul 25, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Current Principal Place of Business: New Principal Place of Business:

6034 CHESTER AVE. 5260 COLLINS RD

207F 301

JACKSONVILLE, FL 32217 JACKSONVILLE, FL 32244 US

Current Mailing Address: New Mailing Address:

5260 COLLINS RD 6034 CHESTER AVE.

JACKSONVILLE, FL 32217 JACKSONVILLE, FL 32244 US

FEI Number: 37-1475317 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KOHN, JOSEPH L PRES KOHN, JOSEPH L PRES 6034 CHESTER AVE. 5260 COLLINS RD

207F

JACKSONVILLE, FL 32217 US JACKSONVILLE, FL 32244 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: JOSEPH L BORDES-KOHN 07/25/2007

> 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: () Delete Title:

BORDES-KOHN, JOSEPH L CEO BORDES-KOHN, JOSEPH L CEO Name: Name: 6034 CHESTER AVE. 5260 COLLINS RD SUITE 301 Address: Address: JACKSONVILLE, FL 32217 City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32244

VΡ Title: COO (X) Change () Addition Title: () Delete KOHN, DOROTHY E VP Name: Name: MC NEALY, TERRA P. O. 6034 CHESTER AVE. 5260 COLLINS RD SUITE 301 Address: Address: JACKSONVILLE, FL 32217 JACKSONVILLE, FL 32244 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete FS OCTAVIA, CORE N FS WILLIAM-SMITH, MARY VP, A Name: Name: 6034 CHESTER AVE. 5260 COLLINS RD SUITE 301 Address Address: City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32244

Title: () Delete Title: () Change (X) Addition BROWN, KEYSHA PRES HU Name: Name: Address: Address: 5260 COLLINS RD SUITE 301 City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32244

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: JOSEPH L BORDES-KOHN CEO 07/25/2007