## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000123218

City-St-Zip:

**FILED** Sep 23, 2005 Secretary of State

Entity Name: D & M FUN FACTORY, INC. **Current Principal Place of Business: New Principal Place of Business:** 1392-1394 SW 160TH AVENUE SUNRISE, FL 33326 **Current Mailing Address: New Mailing Address:** 3517 DEL MAR AVE 3348 BRADENHAM LANE DAVIE, FL 33328 DAVIE, FL 33328 FEI Number: 80-0081598 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: DRUCKER, A. NORMAN 801 NE 167TH ST STE 308 N MIAMI BCH, FL 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: A NORMAN DRUCKER 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition MURPHY, JULIE Name: Name: 1781 ASPEN LANE Address: Address: City-St-Zip: WESTON, FL City-St-Zip: Title: Title: (X) Change ( ) Addition () Delete Name: DRUCKER, MICHELE A Name: DRUCKER, MICHELE A 3517 DEL MAR AVE 3348 BRADENHAM LANE Address: Address: **DAVIE, FL 33328** City-St-Zip: City-St-Zip: **DAVIE. FL 33328** Title: Title: () Delete ( ) Change (X) Addition Name: LEBLANC, CARLENE Name: 1392 SW 160TH AV Address: Address:

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.

City-St-Zip:

SUNRISE, FL 33326

SIGNATURE: MICHELE A DRUCKER **VPT** 09/23/2005