

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000125326

Entity Name: S.G.D. COMMUNICATIONS INC.

FILED
Mar 24, 2006
Secretary of State

Current Principal Place of Business:

1706 W BEDRINGFIELD DR.
TAMPA, FL 33603

New Principal Place of Business:

9000 NORTH FLORIDA AVE
B
TAMPA, FL 33604

Current Mailing Address:

PO BOX 9740
TAMPA, FL 33674

New Mailing Address:

FEI Number: 80-0100747

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAUX, SCHILLER G
1706 W BEDRINGFIELD DR.
TAMPA, FL 33603 US

Name and Address of New Registered Agent:

DAUX, SCHILLER G
P.O. BOX 9740
TAMPA, FL 33674 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: SCHILLER G. DAUX

03/24/2006

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: DAUX, SCHILLER G
Address: 8415 N ARMENIA AVE, STE 240
City-St-Zip: TAMPA, FL 33604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: DAUX, SCHILLER G
Address: P.O. BOX 9740
City-St-Zip: TAMPA, FL 33674

I hereby certify that the information supplied with this filing does not qualify for the 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: SCHILLER G. DAUX

PRES

03/24/2006

Electronic Signature of Signing Officer or Director

Date