

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000135548

FILED  
Nov 01, 2004  
Secretary of State

Entity Name: MICROJENDEALS.COM CORPORATION

## Current Principal Place of Business:

10130 NORTHLAKE BLVD STE 214-124  
W PALM BCH, FL 33412

## New Principal Place of Business:

3600 S STATE ROAD 7  
SUITE 256  
MIRAMAR, FL 33023

## Current Mailing Address:

10130 NORTHLAKE BLVD STE 214-124  
W PALM BCH, FL 33412

## New Mailing Address:

3600 S STATE ROAD 7  
SUITE 256  
MIRAMAR, FL 33023

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

## Name and Address of Current Registered Agent:

EDMONSON, IMENE  
10130 NORTHLAKE BLVD STE 214-124  
W PALM BCH, FL 33412 US

## Name and Address of New Registered Agent:

EDMONSON, IMENE  
20400 NW 7TH AVE  
BLDG D APT#108  
MIAMI, FL 33169 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: IMENE EDMONSON

11/01/2004

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: EDMONSON, IMENE  
Address: 10130 NORTHLAKE BLVD STE 214-124  
City-St-Zip: W PALM BCH, FL 33412

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: EDMONSON, IMENE  
Address: 20400 NW 7TH AVE BLDG D APT#108  
City-St-Zip: MIRAMAR, FL 33169

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: IMENE EDMONSON

D

11/01/2004

Electronic Signature of Signing Officer or Director

Date