2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000140977

Entity Name: INTERNATIONAL MEETING MAKER INC.

FILED Apr 05, 2005 Secretary of State

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

P.O.BOX 150238 P.O.BOX 150238

CAPR CORAL, FL 33915 CAPE CORAL, FL 33915

Current Mailing Address: New Mailing Address:

P.O.BOX 150238 P.O.BOX 150238

CAPR CORAL, FL 33915 CAPE CORAL, FL 33915

FEI Number: 56-2404350 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:

OWENS, JULIA 2325 SW 21ST ST

CAPE CORAL, FL 33991 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: JULIA OWENS

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: D () Delete Title: D (X) Change () Addition

 Name:
 OWENS, JULIA
 Name:
 OWENS, JULIA

 Address:
 P.O.BOX 150238
 Address:
 P.O.BOX 150238

 City-St-Zip:
 CAPR CORAL, FL 33915
 City-St-Zip:
 CAPE CORAL, FL 33915

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: JULIA OWENS D. 04/05/2005