2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000151514

Entity Name: CHANDY, INC.

FILED Dec 23, 2004 Secretary of State

5645 LA GORCE DR 1545 NE 123RD STREET MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33161

Current Mailing Address: New Mailing Address:

5645 LA GORCE DR PO BOX 403072

MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33140

FEI Number: 20-2007123 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:

CONRAD, CHANDLER CONRAD, CHANDLER 1545 NE 123RD STREET 5645 LA GORCE MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33161 US 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: CHANDLER CONRAD 12/23/2004

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CONRAD, CHANDLER CONRAD, CHANDLER Name: Name: 1545 NE 123RD STREET 5645 LA GORCE DR. Address: Address: City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: MIAMI BEACH, FL 33161

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

NOVAK, ANDY NOVAK, ANDY Name:

5645 LA GORCE DR. 1545 NE 123RD STREET Address: Address: MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33161 City-St-Zip: City-St-Zip:

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

MOHR, ERIC Name: Name:

1545 NE 123RD STREET Address Address: City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33161

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

OKLIN, RICHARD Name: Name: Address: Address: 1545 NE 123RD STREET City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33161

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.

Ρ SIGNATURE: CHANDLER CONRAD 12/23/2004