2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000003167

Entity Name: PINNACLE REALTY AND INVESTMENTS, CO.

FILED Oct 13, 2007 Secretary of State

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

490 OPA LOCKA BOULEVARD SUITE 11 OPA LOCKA, FL 33054

New Mailing Address: Current Mailing Address:

3725 NW 197TH ST 17068 S.W. 16TH ST

PEMBROKE PINE, FL 33055 MIAMI, FL 33055

FEI Number: 65-1212758 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US

THEOLA NORRIS 17068 S.W. 16TH ST. PEMBROKE PINES, FL 33027 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: THEOLA NORRIS 10/13/2007

> 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 (). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition NORRIS, CLYDE L JR NORRIS, CLYDE L JR Name: Name:

490 OPA LOCKA BOULEVARD SUITE 11 17068 S.W. 16TH ST. Address: Address: City-St-Zip: OPA LOCKA, FL 33054 City-St-Zip: PEMBROKE PINES, FL 33027

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

Name: NORRIS. KEVIN M JR Name: NORRIS, THEOLA 490 OPA LOCKA BOULEVARD SUITE 11 17068 S.W. 16TH ST. Address: Address: OPA LOCKA, FL 33054 PEMBROKE PINES, FL 33027 City-St-Zip: City-St-Zip:

Title: Title:

(X) Change () Addition () Delete LYONS, ERIC Name: NORRIS, THEOLA Name: 490 OPA LOCKA BLVD, STE 11 17068 S.W. 16TH ST. Address: Address: City-St-Zip: OPA LOCKA, FL 33054 City-St-Zip: PEMBROKE PINES, FL 33027

I hereby certify that the information supplied with this filing does not qualify 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: CLYDE L. NORRIS JR. PD 10/13/2007