

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000010758

FILED  
Sep 18, 2007  
Secretary of State

Entity Name: COMPETITIVE AUTO GRAPHICS, INC.

## Current Principal Place of Business:

18136 SCOOTER COURT  
SPRING HILL, FL 34610 US

## New Principal Place of Business:

## Current Mailing Address:

5408 ST JAMES DRIVE  
NEW PORT RICHEY, FL 34652 US

## New Mailing Address:

18136 SCOOTER COURT  
SPRING HILL, FL 34610 US

FEI Number: 20-0600263

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DREW, KELLY  
5408 ST JAMES DRIVE  
NEW PORT RICHEY, FL 34652 US

## Name and Address of New Registered Agent:

DECKER, CARLA E  
18136 SCOOTER COURT  
SPRING HILL, FL 34610 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: CARLA DECKER

09/18/2007

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 ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DECKER, CARLA B  
Address: 18136 SCOOTER COURT  
City-St-Zip: SPRING HILL, FL 34610 US

Title: S ( ) Delete  
Name: DECKER, CARLA B  
Address: 18136 SCOOTER COURT  
City-St-Zip: SPRING HILL, FL 34610 US

Title: T ( ) Delete  
Name: DECKER, CARLA B  
Address: 18136 SCOOTER COURT  
City-St-Zip: SPRING HILL, FL 34610 FL

Title: D ( ) Delete  
Name: DECKER, CARLA B  
Address: 18136 SCOOTER COURT  
City-St-Zip: SPRING HILL, FL 34610 US

Title: VPD ( ) Delete  
Name: DECKER, JAMES  
Address: 18136 SCOOTER CRT  
City-St-Zip: SPRING HILL, FL 34610

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CARLA DECKER

P

09/18/2007

Electronic Signature of Signing Officer or Director

Date