

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000022387

Entity Name: RIGHT DIMENSIONS INC.

FILED  
Oct 06, 2006  
Secretary of State

## Current Principal Place of Business:

2832 RIDGE AVENUE  
SARASOTA, FL 34235 US

## New Principal Place of Business:

## Current Mailing Address:

2832 RIDGE AVENUE  
LOT. 1  
SARASOTA, FL 34235 US

## New Mailing Address:

FEI Number: 20-0686578      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNSON, KEITH  
2832 RIDGE AVENUE  
SARASOTA, FL 34235 US

## Name and Address of New Registered Agent:

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: KEITH JOHNSON

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: DPS ( ) Delete  
Name: JOHNSON, KEITH  
Address: 2832 RIDGE AVE.  
City-St-Zip: SARASOTA, FL 34235

Title: V ( ) Delete  
Name: JOHNSON, DARRIN  
Address: 1915 FERN AVE  
City-St-Zip: SARASOTA, FL

Title: T ( ) Delete  
Name: MELVIN, JESSE  
Address: 3422 YANKEE AVE.  
City-St-Zip: SARASOTA, FL 34232 US

## 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:

I hereby certify that the information supplied with this filing does not qualify for the 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: KEITH JOHNSON

Electronic Signature of Signing Officer or Director

DPS

10/06/2006

Date