2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000049646

Entity Name: FIRST AGENCY (JAM.), INC.

FILED Sep 30, 2005 Secretary of State

| Current Principal Place of Business: | | New Principal Place of Business: | |
|---|--|---|--|
| | AY NOLIA AVE AUDERDALE, FL 33068 | | |
| Current Mailing Address: | | New Mailing Address: | |
| | AY NOLIA AVE AUDERDALE, FL 33068 | | |
| FEI Number | : FEI Number Applied For (X) | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and | Address of Current Registered Agent: | Name and Address o | f New Registered Agent: |
| 918 MOMA | DN, MILFORD AY NOLIA AVE AUDERDALE, FL 33068 US | | |
| | e named entity submits this statement for the e of Florida. | e purpose of changing its registered | d office or registered agent, or both, |
| SIGNATUI | RE: CRANSTON MILFORD | | |
| | Electronic Signature of Registered A | gent | Date |
| | ce with s. 607.193(2)(b), F.S., the corporation did | not receive the prior notice. | |
| | mpaign Financing Trust Fund Contribution (). S AND DIRECTORS: | ADDITIONS/CHANGE | ES TO OFFICERS AND DIRECTOR |
| Title: Name: Address: City-St-Zip: | D () Delete CRANSTON, NICOLE 1209 LOBO CT ABINGDON, MD 21009 | Title: Name: Address: City-St-Zip: | ()Change ()Addition |
| Title: Name: Address: City-St-Zip: | D () Delete JAMES, VIVIENNE 712 PEE CLOSE PORTMORE PINE ST CATHERINE, JAMAICA, | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | D () Delete CRANSTON, MILFORD 918 MOMAY NOLIA AVE NORTH LAUDERDALE, FL 33068 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | D () Delete HUNT, VENITE 1 CAMPDEN RD KINGSTON 16 JAMAICA, | Title: Name: Address: City-St-Zip: | () Change () Addition |

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: CRANSTON MILFORD D 09/30/2005