

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000061216

FILED  
May 17, 2006  
Secretary of State

Entity Name: MEDEIROS SERVICES CORP.

## Current Principal Place of Business:

6800 NW 39TH AVE LOT 127  
COCONUT CREEK, FL 33073

## New Principal Place of Business:

481 SCRUB JAY DRIVE  
SAINT AUGUSTINE, FL 32092 US

## Current Mailing Address:

6800 NW 39TH AVE LOT 127  
COCONUT CREEK, FL 33073

## New Mailing Address:

481 SCRUB JAY DRIVE  
SAINT AUGUSTINE, FL 32092 US

FEI Number: 20-1011518

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MEDEIROS, FABIO  
6800 NW 39TH AVE LOT 127  
COCONUT CREEK, FL 33073 US

## Name and Address of New Registered Agent:

SHOCKMEDIA CORPORATION  
7862 W IRLO BRONSON HWY  
121  
KISSIMMEE, FL 34747 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: JOSE JARDIM JUNIOR

05/17/2006

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: DPV ( ) Delete  
Name: MEDEIROS, FABIO  
Address: 6800 NW 39TH AVE LOT 127  
City-St-Zip: COCONUT CREEK, FL 33073

Title: ST ( ) Delete  
Name: MEDEIROS, FABIO  
Address: 6800 NW 39TH AVE LOT 127  
City-St-Zip: COCONUT CREEK, FL 33073

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: MEDEIROS, FABIO  
Address: 481 SCRUB JAY DRIVE  
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

Title: S (X) Change ( ) Addition  
Name: MEDEIROS, FABIO  
Address: 481 SCRUB JAY DRIVE  
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

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: FABIO MEDEIROS

P

05/17/2006

Electronic Signature of Signing Officer or Director

Date