

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000072147

**FILED**  
**Oct 03, 2011**  
**Secretary of State**

**Entity Name:** THE MEDIATION GROUP, INC.

**Current Principal Place of Business:**

4800 W. COMMERCIAL BOULEVARD  
TAMARAC, FL 33319 US

**New Principal Place of Business:**

12555 ORANGE DRIVE  
SUITE 208  
DAVIE, FL 33330 US

**Current Mailing Address:**

4800 W. COMMERCIAL BOULEVARD  
TAMARAC, FL 33319 US

**New Mailing Address:**

P.O.BOX 451264  
SUNRISE, FL 33321

**FEI Number:** 20-1231013

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHEINER, HOWARD MR.  
204 NE 16TH TERRACE  
FORT LAUDERDALE, FL 33301 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: HOWARD SCHENER

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SCHEINER, HOWARD MR.  
Address: 204 NE 16TH TERRACE  
City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: CFO  
Name: SCHEINER, JACK MR.  
Address: 7913 EXETER BLVD WEST  
City-St-Zip: TAMMARAC, FL 33321 US

I hereby 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 all other like empowered.

SIGNATURE: HOWARD SCHEINER

PRES

10/03/2011

Electronic Signature of Signing Officer or Director

Date