2006 FOR PROFIT CORPORATION REINSTATEMENT

		IAIEIVIENI		 7		• • • • • • • • • • • • • • • • • • •		
DOCUMENT # P04000075088								
1. Entity Name VISIONARY MILLIONARIES, INC.					06 OCT 31 (1111: 29			
VISIONART MILLIONARIES, INC.								
			90 W			:		
Principal Place		Mailing Address					•	
1662 SW ATROS BLVD Port St. Lucie, Fl. 34984		97-10 37TH AVE CORONA, NY 113 6 8						
	,ie, (\$ 19 8 11 8 11 11 11 11 11	I en ist albis anni ra fii an ii: I		11 (
2. Principal Pl	ace of Business	3. Mailing Address						
					EASTATEMEND (11/05) De			
Suite, Apt.	#, etc	Suite, Apt. #, etc		He Ha	MIKIN	C 32 (C8 (11/05)	00	
City & State		City & State		4. FEI Numb	er	Ар	plied For	
		Zo Carolin		16-170	16-1701257 Not Applicable 5 Continue of Column Province \$8.75 Additional			
Zip	Country	Ζιρ	Country	5. Certificate	ol Status Desired	Fee Required		
	6. Name and Address of Curr	rent Registered Agent		7. Name and	d Address of New Re	gistered Agent		
JACKSON	. BYRON L		Name					
1662 SW A	TROS BLVD		Street A	ddress (PO Box Numb	er is Not Acceptable)			
PORT ST.	LUCIE, FL 34984							
			City			FL Zip Code		
9 The above	named entity submits this stateme	ant for the purpose of changing it	s registered office o	r registered attent, or be	oth, in the State of Flori		and accept	
	ions of registered agent	an for the purpose of changing in	i	r registered agent, or of	XII, III IIIG GIGIIG OFFICI	da. Tantramini Willi,	and doop.	
SIGNATURE_	appaceny	_ BYRON	1 JACKSUI	V		10-26-06		
	Sight fire, typed or priviled institute registered in	egent and title if applicable (NO	TE: Registered Agent sign	ature required when reinstating	ı) 	DVIE		
	.E NOW!!! FEE IS \$150.00 nuary 1, 2007, Fee will be \$3	00.00			In accordance will corporation did n	ith s. 607.193(2)(b), ot receive the prior r	F.S., the notice.	
10.		AND DIRECTORS	11.	ADDITIONS	CHANGES TO DEEK	CERS AND DIRECTORS	S IN 11	
TILLE	PT	☐ Delete	THILE	, noon to the	7011110101010	☐ Change	Addition	
NAME	JACKSON, BYRON L		NAME	20	000813 1/0601049-	87922,	20	
STREET ADDRESS CHY-ST-ZIP	97-10 37TH AVE CORONA, NY 11368		STREET ADDRESS CITY-ST-ZIP	10/3)	1/0601049-	-017 **150.	. טט	
TITLE	vs	☐ Delete	HTLE			☐ Change	Addition	
NAME	JACKSON, MAVIS M		NAME					
STREET ADDRESS CHY ST-ZIP	97-10 37TH AVE CORONA, NY 11368		STREET ADDRESS CHTY ST ZIP					
41/16	D	☐ Delate	ille			☐ Change	Additio	
NAME	JACKSON, BYRON L		HAME			•		
STREET ADDRESS CITY+ST-ZIP	97-10 37TH AVE CORONA, NY 11368		STREET ADDRESS CITY ST ZIP					
TITLE	D	☐ Delete	TITLE			Change	Additio	
NAME	JACKSON, MAVIS M		NAME					
STREET ADDRESS CITY ST-ZIP	97-10 37TH AVE CORONA, NY 11368		STREET ADDRESS CITY ST ZIP					
IIILE	CORONA, NY 11366		TOLE			☐ Change	Additio	
NAME		∴ Delete	NAME					
STREET ADDRESS CITY-ST-ZIP			STREET ADORESS CITY ST ZIP					
UITLE		Delete	IIILE			☐ Change	Additio	
NAME		Donato	NAMI				-	
STREET ADDRESS			STHEET ADDRESS CITY ST ZIP					
CITY ST-ZIP	certify that the information supplied	d with this filling does not qualify	for the exemptions	Contained in Chanter 1:	19. Florida Statutes 11	urther certify that the i	nformation	
indicator	certify that the information supplied d on this report or supplemental rep rporation or the receiver or trustee	nort is true and accurate and that	liene cionalura chall	nave the same tenal etti	ect as it made under d	am: :na: : am an omcer	or unector	
changed	rporation or the receiver of trustee i, or on an attachment with an addr	ress, with all other like empowere	d.					
CICNAT	TUDE. Pulledar	bind 2	SYRON L.	SACKSUN	W/26/06	347.693	3086	
SIGNAT	SMATURIAND TYPE	ED OR PUN DED NAME OF SIGNING OFFICE	R OR DIRECTOR	J	Date	Dayline Phone #		