## 2006 FOR PROFIT CORPORATION REINSTATEMENT

REINSTATEMENT								
DOCUMENT # P04000105772  1. Entity Name EDEN PROPERTY VENTURES, INC.					FILED			
- <b>4</b>				A TOTAL		U/ <b>3AR</b> - 2	图 多 经	
Principal Place of Business 10560 WALNUT VALLEY DRIVE BOYNTON BEACH, FL 33437 US		Mailing Address 10560 WALNUT VALLEY DRIVE BOYNTON BEACH, FL 33437		US		Seere far Tallahas	Y OF STATE SEE, FLORIDA	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		12282006		CR2E098/11/05	do	
City & State		City & State			4. FE Numb 20-162	3554		pplied For lot Applicable
Zip	Country	Zip Coun		try	5. Certificate	of Status Desired	S8.75 Ac Fee Requir	
Name and Address of Current Registered Agent				Name	7. Name and	Address of New Reg	istered Agent	
10560 WA	KRISTEN L LNUT VALLEY DRIVE I BEACH, FL 33437		Street Address		P.O. Box Number is Not Acceptable)			
				City			FL Zip Coo	de
8. 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. I am familiar with, and accept the obligations of registered agent.								, and accept
SIGNATURE								
FILE NOWII: FEE IS \$750.00 After January 1, 2007, Fee will be \$900.00								
10. OFFICERS AND DIRECTORS			11.		ADDITIONS	CHANGES TO OFFICE	PS AND DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Delete BENSON, KRISTEN L 10560 WALNUT VALLEY DRIVE BOYNTON BEACH, FL 33437		THILE NAME STREET ADDRESS CITY-ST-ZIP			000828E		☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		ľ			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		T ADDRESS ST-ZIP			☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete		T ADDRESS ST-ZIP			☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	CITY-:	I ADDRESS ST-ZIP			☐ Change	Addition
12. I hereby c	ertify that the information supplied with	this filing does not qualify for t	the exer	nptions contained	in Chapter 119	, Florida Statutes. I furt	her certify that the in	nformation

2. Thereby carry that the information supplied with this hing does not quality for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CIGNATUDE.

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A Mitchell JAN 2 2001