2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000109894

Entity Name: SHARP STRAIGHT LINE, INC.

FILED Dec 15, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

840 CYPRESS PARK #M 117 SE 15TH STREET # W POMPANO BEACH, FL 33064 DEERFIELD BEACH, FL 33441 US

Current Mailing Address: New Mailing Address:

840 CYPRESS PARK #M 117 SE 15TH STREET # W POMPANO BEACH, FL 33064 DEERFIELD BEACH, FL 33441 US

FEI Number: 20-1418590 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TAX HOUSE CORPORATION 1261 E SAMPLE ROAD POMPANO BEACH, FL 33064 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: BRENO R GOMES

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: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete LUCAS, RODOLFO Name: Name: LUCAS, RODOLFO 840 CYPRESS PARK #M 117 SE 15TH STREET # W Address: Address: City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: Title: PD (X) Change () Addition () Delete

Name: LUCAS, MEDARDO Name: LUCAS, MEDARDO 840 CYPRESS PARK #M 117 SE 15TH STREET # W Address: Address: POMPANO BEACH, FL 33064 DEERFIELD BEACH, FL 33441 US City-St-Zip: City-St-Zip:

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: RODOLFO LUCAS PD 12/15/2005