

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

07 JAN 23 PM 2:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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01/29/07--01061--013 \*\*1058.75

DOCUMENT # P04000112658

1. Corporation Name

East Coast Digital Management, Inc.

**REINSTATEMENT**

05-07

2. Principal Office Address - No P.O. Box # 375 Douglas Ave. Suite, Apt. #, etc. Suite 1008 City & State Altamonte Springs, FL Zip 32714		Country USA		3. Mailing Office Address 375 Douglas Ave. Suite, Apt. #, etc. Suite 1008 City & State Altamonte Springs, FL Zip 32714		Country USA	
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4. Date Incorporated or Qualified To Do Business in Florida 08/02/2004	
5. FEI Number 20-1450114	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name  
Stephen W. Beik

Street Address (P.O. Box Number is Not Acceptable)  
375 Douglas Ave.

Suite, Apt. #, Etc.  
Suite 1008

City Altamonte Springs	State FL	Zip Code 32714
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The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent

*Stephen W. Beik*

REGISTERED AGENT MUST SIGN

Date

1/22/07

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Rory A. Stephen	1730 M St., NW, Ste 905	Washington, DC 20036
D	Francis Frangipane	125 Robins Square Ct.	Robins, IA 52328
S	Stephen W. Beik	375 Douglas Ave., Ste 1008	Altamonte Springs, FL 32714
T	Wendy J. Stephen	1730 M St., NW, Ste 905	Washington, DC 20036
D	Marilyn Speirs	3 Jellieston Terr Patne	KA6 7JZ UK Eyrshire, Scotland

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

*Stephen W. Beik* Stephen W. Beik

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/07

Date

407-862-5084

Daytime Phone #