2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000113616

Entity Name: MARTY NORMAN AND COMPANY OF CENTRAL FL INC

FILED Nov 06, 2006 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
	ATE ROAD 46 FO, FL 32776				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P O BOX 5 SORRENT	527 FO, FL 32776				
FEI Number	: 59-3556096	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
	, MARTY ATE ROAD 46 FO, FL 32776	US			
	named entity see of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE: MARTY N	IORMAN			
	Electron	ic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () NORMAN, MAR 24334 STATE F SORRENTO, FI	ROAD 46	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: MARTY NORMAN P 11/06/2006