2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000117180

Entity Name: A C R GLOBAL DISTRIBUTORS INC

548 W MELROSE CIRCLE

FORT LAUDERDALE, FL 33312

Address: City-St-Zip: FILED Sep 23, 2005 Secretary of State

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Current P	rincipal Place of Business:	New Principal Place	New Principal Place of Business:	
	LROSE CIRCLE JDERDALE, FL 33312			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
	LROSE CIRCLE JDERDALE, FL 33312			
FEI Number	FEI Number Applied For	X) FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:		nt: Name and Address o	Name and Address of New Registered Agent:	
548 W ME FORT LAU The above	SON, RYAN LROSE CIRCLE JDERDALE, FL 33312 US named entity submits this statement fo	r the purpose of changing its registere	d office or registered agent, or both,	
	e of Florida.			
SIGNATU	RE: RYAN ROBERTSON Electronic Signature of Registere	ad Agent	 Date	
	ce with s. 607.193(2)(b), F.S., the corporation npaign Financing Trust Fund Contribution (did not receive the prior notice.	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete ROBERTSON, RYAN 548 W MELROSE CIRCLE FORT LAUDERDALE, FL 33312	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () Delete HICKS, CHANCE 548 W MELROSE CIRCLE FORT LAUDERDALE, FL 33312	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	TRE () Delete ROBERTSON, AUDTRY	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: RYAN ROBERTSON P 09/23/2005