

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000125662

FILED  
Mar 22, 2007  
Secretary of State

Entity Name: BLENDER INVESTMENT GROUP, INC

## Current Principal Place of Business:

981 SORRENTO DRIVE  
WESTON, FL 33326 US

## New Principal Place of Business:

## Current Mailing Address:

981 SORRENTO DRIVE  
WESTON, FL 33326 US

## New Mailing Address:

1719 WEST SURF ST  
CHICAGO, IL 60657 US

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DE TOVAR, CORA  
981 SORRENTO DRIVE  
WESTON, FL 33326 US

## Name and Address of New Registered Agent:

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: CORA DE TOVAR

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: P ( ) Delete  
Name: DE TOVAR, CORA  
Address: 981 SORRENTO DRIVE  
City-St-Zip: WESTON, FL 33326 US

Title: VP ( ) Delete  
Name: GONZALEZ, CORY  
Address: 981 SORRENTO DRIVE  
City-St-Zip: WESTON, FL 33326 US

Title: S ( ) Delete  
Name: TOVAR, ADOLFO  
Address: 981 SORRENTO DRIVE  
City-St-Zip: WESTON, FL 33326 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CORY GONZALEZ

VP

03/22/2007

Electronic Signature of Signing Officer or Director

Date