

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000135537

Entity Name: ZOOPRAX TECHNOLOGIES, INC.

FILED
May 11, 2008
Secretary of State

Current Principal Place of Business:

1900 NW CORPORATE BOULEVARD
SUITE 400 EAST
BOCA RATON, FL 33431

New Principal Place of Business:

5970 SW18TH STREET
SUITE 129
BOCA RATON, FL 33433

Current Mailing Address:

1900 NW CORPORATE BOULEVARD
SUITE 400 EAST
BOCA RATON, FL 33431

New Mailing Address:

5970 SW18TH STREET
SUITE 129
BOCA RATON, FL 33433

FEI Number: 20-1697843

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SHOPE, WILLIAM C
1900 NW CORPORATE BOULEVARD
SUITE 400 EAST
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

SHOPE, WILLIAM C
23204-D FOUNTAIN VIEW DR
BOCA RATON, FL 33433 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: WILLIAM C SHOPE

05/11/2008

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,S () Delete
Name: SHOPE, WILLIAM C
Address: 1900 NW CORPORATE BOULEVARD, SUITE 400 EAS
City-St-Zip: BOCA RATON, FL 33431

Title: D () Delete
Name: SHOPE, WILLIAM C JR
Address: 1900 NW CORPORATE BOULEVARD, SUITE 400 EAS
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,S (X) Change () Addition
Name: SHOPE, WILLIAM C
Address: 23204-D FOUNTAIN VIEW DR
City-St-Zip: BOCA RATON, FL 33433

Title: D (X) Change () Addition
Name: SHOPE, WILLIAM C JR
Address: 68 PARTRICK RD
City-St-Zip: WESTPORT, CT 06880

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM C. SHOPE

PRES

05/11/2008

Electronic Signature of Signing Officer or Director

Date