2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000135955

Entity Name: PB&QINC.

FILED May 30, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

2840 WEST BAY DRIVE 611 S. FT HARRISON AVE

278 #380

BELLEAIRE BLUFFS, FL 33770 US CLEARWATER, FL 33756 US

Current Mailing Address: New Mailing Address:

2840 WEST BAY DRIVE 611 S. FT HARRISON AVE

278 #380

BELLEAIRE BLUFFS, FL 33770 US CLEARWATER, FL 33755 US

FEI Number: 20-1681013 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCDANIEL, QUAILYNN
2840 WEST BAY DRIVE
278

MCDANIEL, QUAILYNN
611 S. FT HARRISON AVE
#380

BELLEAIRE BLUFFS, FL 33770 US CLEARWATER, FL 33756 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: QUAILYNN MCDANIEL 05/30/2007

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 MCDANIEL, QUAILYNN
 Name:
 MCDANIEL, QUAILYNN

 Address:
 315 MAGNOLIA DRIVE
 Address:
 611 S. FT HARRISON AVE #380

City-St-Zip: CLEARWATER, FL 33756 US City-St-Zip: CLEARWATER, FL 33756 US

Title: VP () Delete Title: VP (X) Change () Addition Name: JONES, PHAEDRA Name: JONES, PHAEDRA

Address: 1365 PINELLAS ROAD Address: 315 MARIVA AVE
City-St-Zip: CLEARWATER, FL 33756 US City-St-Zip: CLEARWATER, FL 33755 US

Title: S, T () Delete Title: () Change () Addition

 Name:
 DANIELLS, BROOKE
 Name:

 Address:
 1610 WALNUT STREET
 Address:

 City-St-Zip:
 CLEARWATER, FL 33755 US
 City-St-Zip:

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: BROOKE DANIELLS S, T 05/30/2007