## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000137199

City-St-Zip:

PALM BEACH GARDENS, FL 33410

Entity Name: PRE-MOVE MARKETING, INC.

FILED Feb 19, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2759 RHONE DRIVE PALM BEACH GARDENS, FL 33410 **Current Mailing Address: New Mailing Address:** C/O KATZ IPPOLITI 1-60, PC STE 406 C/O KATZ & ASSOCIATES CPAS, P.C. 254 SOUTH MAIN STREET STE.406 NEW CITY, NY 10956 NEW CITY, NY 10956 FEI Number: 20-1722534 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GREENE, ERNEST C 2759 RHÓNE DRIVE PALM BEACH GARDENS, FL 33410 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: ERNEST C GREENE 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: () Delete () Change () Addition GREENE, ERNEST C Name: Name: 2759 RHONE DRIVE Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: Title: Title: () Delete () Change () Addition Name: GREENE, CHERYL B Name: 2759 RHONE DRIVE Address: Address: PALM BEACH GARDENS, FL 33410 City-St-Zip: City-St-Zip: Title: Title: F VP ( ) Delete () Change () Addition INGENITO, ALPHONSE Name: Name: 2759 RHONE DRIVE Address: Address:

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.

City-St-Zip:

SIGNATURE: ERNEST C GREENE **DPT** 02/19/2008