9/27/05 813-382-0867

2005 FOR PROFIT CORPORATION REINSTATEMENT

SIGNATURE: MANUEL ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REINSTATEMENT					<u></u> .	77	
1. Entity Nam	MENT # P04000140 EAM CONSULTING, INC.				PH 4: 54		
Principal Place 7506 TRANS TAMPA, FL 3	OM COURT	Mailing Address 7506 TRANSOM COURT TAMPA, FL 33607 US			ALLAL.S.	LEGICAL CONTRACTOR CON	05
14811	lace of Business Berkford Ave	3. Mailing Address 14811 Bukford Ave Suite, Apt. #, etc.		ve ee			
Suite, Apt.	#, etc. <b>282.48</b> a 3~	Suite, Apt. #, etc.		927200	5 REIN-P	CR2E098 (6/04)	
City & State Tamba, FL		City & State  Tamor FL		4. FEI Nu	mber	<u> </u>	oplied For of Applicable
Zip	Country	Zip / Country		5. Certific	5. Certificate of Status Desired S8.75 Additional Fee Required		
3362	6. Name and Address of Current F	legistered Agent		7. Name	and Address of New I		
				MC 6 Li. ddress (P.O. Box Nu	mber is Not Acceptable	ennifer A	
IMMI AL	2 33007		City	811 Berl	ctord A	rと FL <sup>Zi</sup> 吹気	f. 75
	named entity submits this statement for ions of registered agent.	the purpose of changing its re	egistered office or	registered agent, or	both, in the State of F	orida. I am familiar with,	and accept
SIGNATURE.	Signature, typing or printed hame of registered agent a	nd title if applicable (NOTE:	Registered Agent signs	iture required when reloats	ling)	1/27/05 DATE	
	E NOW!!! FEE IS \$750.00 nuary 1, 2006, Fee will be \$900.00	D					
10	OFFICERS AND I	DIRECTORS	11.	ADDITIO	NS/CHANGES TO OF	FICERS AND DIRECTOR	i
NAME STREET ADDRESS CITY-ST-ZIP	D,P MCGUINNESS, JENNIFER A 7506 TRANSOM COURT TAMPA, FL 33607	Detete	TITLE NAME STREET ADDRESS CHY-ST-ZIP	10	<b>50006:</b> 7047050107	Change  206765  25024   ***15	Addition Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	VP MCGUINNESS, DANIEL 7506 TRANSOM COURT TAMPA, FL 33607	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Joann 14130 A Tampa	Cicalese 1001 Hills FL 33108	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T,S CICALESE, JOANN 7506 TRANSOM COURT TAMPA, FL 33607	CSCOelete	TIFLE NAME STREET ADDRESS CITY-S1-ZIP	- CI	Mc buing bor Hills	Change	Addition
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HITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
indicated of the co	certify that the information supplied with d on this report or supplemental report is proporation or the receiver or trustee empora- tion on an attachment with an address.	true and accurate and that mo wered to execute this report a					

## Q POWERTEAM CONSULTING,INC.

September 27, 2005

To whom it may concern:

Please accept this request to waive reinstatement fees for Powerteam Consulting, Inc as Notification was not received due to an address change. Included is a check for \$150.00 for 2005 fees. As a newly incorporated company in Oct 2004, we were incorrectly informed that no further fees would be due to Jan 2006. I do not forsee us being late in subsequent years.

Regards,

Jennifer McGuinness

President/CEO