

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000145175

Entity Name: START SHOPPING, INC.

FILED  
Nov 06, 2005  
Secretary of State

## Current Principal Place of Business:

1596 QUAIL DRIVE  
UNIT 5  
WEST PALM BEACH, FL 33409 US

## Current Mailing Address:

1596 QUAIL DRIVE  
UNIT 5  
WEST PALM BEACH, FL 33409 US

## New Principal Place of Business:

854 BLUE RIDGE CIRCLE  
WEST PALM BEACH, FL 33409 US

## New Mailing Address:

P.O. BOX 223327  
WEST PALM BEACH, FL 33422 US

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

## Name and Address of Current Registered Agent:

LEGALZOOM NEVADA, INC.  
44 W. FLAGLER ST.  
SUITE 675  
MIAMI, FL 33130 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: GIOVANNA CASTANHEIRA WORD

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: PRES ( ) Delete  
Name: CASTANHEIRA, GIOVANNA C  
Address: 1596 QUAIL DRIVE, UNIT 5  
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: SECR ( ) Delete  
Name: CASTANHEIRA, MONICA  
Address: 1596 QUAIL DRIVE, UNIT 5  
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: SMGR (X) Delete  
Name: CASTANHEIRA, RENEE  
Address: 1596 QUAIL DRIVE, UNIT 5  
City-St-Zip: WEST PALM BEACH, FL 33409 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: WORD, GIOVANNA C  
Address: 854 BLUE RIDGE CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: MGR (X) Change ( ) Addition  
Name: WORD, SHAWN  
Address: 854 BLUE RIDGE CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33409 US

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 Section 119.07(3)(i), 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: GIOVANNA CASTANHEIRA WORD

Electronic Signature of Signing Officer or Director

PRES

11/06/2005

Date