

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000156442

Entity Name: ALTERING STATES INC.

FILED
Oct 28, 2005
Secretary of State

Current Principal Place of Business:

50 EAST CENTRAL AVE
SUITE B
ORLANDO, FL 32801

New Principal Place of Business:

50 EAST CENTRAL AVENUE
SUITE B
ORLANDO, FL 32801

Current Mailing Address:

595 W. CHURCH ST.
#602
ORLANDO, FL 32805

New Mailing Address:

595 WEST CHURCH STREET
SUITE 602
ORLANDO, FL 32805

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARLTON, JUSTIN R
595 W. CHURCH ST.
#602
ORLANDO, FL 32805 US

Name and Address of New Registered Agent:

GREENE & LEE, P.L.
111 NORTH ORANGE AVENUE
SUITE 775
ORLANDO, FL 32801 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: ROBERT LEE, MANAGER

10/28/2005

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 () Delete
Name: CARLTON, JUSTIN R
Address: 595 W. CHURCH ST. #602
City-St-Zip: ORLANDO, FL 32805

Title: VP (X) Delete
Name: RIVERA, JENNETTE
Address: 595 W. CHURCH ST.
City-St-Zip: ORLANDO, FL 32805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CARLTON, JUSTIN R
Address: 595 W. CHURCH STREET, SUITE 602
City-St-Zip: ORLANDO, FL 32805

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: JUSTIN R. CARLTON

P

10/28/2005

Electronic Signature of Signing Officer or Director

Date