

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000161014

FILED
Mar 03, 2006
Secretary of State

Entity Name: WOLABCO INTERNATIONAL INC.

Current Principal Place of Business:

6007 ARLINGTON WAY
FT PIERCE, FL 34951

New Principal Place of Business:

Current Mailing Address:

6007 ARLINGTON WAY
FT PIERCE, FL 34951

New Mailing Address:

FEI Number: 51-0531250

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOCK, JENNIFER
5804 INDIAN PINES BLVD
FT PIERCE, FL 34951 US

Name and Address of New Registered Agent:

TRAINOR, CLARK
191 SW 62 AVE
PLANTATION, FL 33317 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: CLARK TRAINOR

03/03/2006

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: PSD () Delete
Name: ADODERIN, EDWARD O
Address: 6007 ARLINGTON WAY
City-St-Zip: FT PIERCE, FL 34951

Title: D () Delete
Name: ADODERIN, BEATRICE O
Address: 6007 ARLINGTON WAY
City-St-Zip: FT PIERCE, FL 34951

Title: D () Delete
Name: ADODERIN, OLUBUSAYO O
Address: 6007 ARLINGTON WAY
City-St-Zip: FT PIERCE, FL 34951

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: EDWARD ADODERIN

PSD

03/03/2006

Electronic Signature of Signing Officer or Director

Date