

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000162951

FILED
Oct 11, 2007
Secretary of State

Entity Name: COMMUNICATION SOLUTIONS GROUP, INC.

Current Principal Place of Business:

2447 ST. AUGUSTINE BLVD.
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

5225 SHERIDAN DR.
WILLIAMSVILLE, NY 14221

New Mailing Address:

P.O. BOX 475
GETZVILLE, NY 14068

FEI Number: 02-0542180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CURT KREISEL

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: PD () Delete
Name: VETALINO, NICHOLAS J
Address: 122 KING ANTHONY WAY
City-St-Zip: GETZVILLE, NY 14068

Title: TSD () Delete
Name: VERTICALINO, ANETTE
Address: 122 KING ANTHONY WAY
City-St-Zip: GETZVILLE, NY 14068

Title: ASD () Delete
Name: AASEN, NICOLE J
Address: 3243 ULYSSES ST. NE
City-St-Zip: MINNEAPOLIS, MN 55418

Title: D () Delete
Name: VERTICALINO, ANTHONY J
Address: 1341 42ND AVE. NE
City-St-Zip: MINNEAPOLIS, MN 55421

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PSD (X) Change () Addition
Name: VERTICALINO, ANNETTE
Address: 122 KING ANTHONY WAY
City-St-Zip: GETZVILLE, NY 14068

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 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: ANNETTE VERTICALINO

PRES

10/11/2007

Electronic Signature of Signing Officer or Director

Date