2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000022764

Entity Name: LAND LOVERS USA, INC.

FILED Jul 26, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Jurrent Principal Place of Business:	New Principal Place of Business:

1601 NORTH PALM AVENUE 1601 NORTH PALM AVENUE

10E SUIYE 110E

PEMBROKE PINES, FL 33026 PEMBROKE PINES, FL 33026

Current Mailing Address: New Mailing Address:

1601 NORTH PALM AVENUE 1601 NORTH PALM AVENUE SUITE 110E

PEMBROKE PINES, FL 33026 PEMBROKE PINES, FL 33026

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ARTWELL, HERBERT ECCLES, CHARMAINE 189 SW 194TH AVENUE 1601 NORTH PALM AVENUE

PEMBROKE PINES, FL 33332 US SUITE 110E PEMBROKE PINES, FL 33332 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: CHARMAINE ECCLES 07/26/2007

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 ARTWELL, HERBERT
 Name:
 ECCLES, CHARMAINE

 Address:
 6189 SW 194TH AVENUE
 Address:
 1601 NORTH PALM AVENUE

 City-St-Zip:
 PEMBROKE PINES, FL 33332
 City-St-Zip:
 PEMBROKE PINES, FL 33332

Title: V (X) Delete Title: () Change () Addition

 Name:
 GIBSON, DIONNE P
 Name:

 Address:
 6189 SW 194TH AVENUE
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33332
 City-St-Zip:

Title: T (X) Delete Title: () Change () Addition

 Name:
 DANIEL, DENVILLE
 Name:

 Address:
 6160 SW 195TH AVENUE
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 33332
 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: CHARMAINE ECCLES PRES 07/26/2007