2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000053965

FILED Dec 11, 2006 Secretary of State

Entity Name: CERTIFIED SECURITY PROJECT MANAGERS INC.

Current Principal Place of Business:		New Principal Place of Business:		
	QUAYSIDE DR CITY, FL 33026			
Current N	lailing Address:		New Mailing Addres	s:
	QUAYSIDE DR CITY, FL 33026			
FEI Number	: FEI Numbe	r Applied For()	FEI Number Not Applicable (X)	Certificate of Status Desired ()
Name and	d Address of Current Reg	istered Agent:	Name and Address of	of New Registered Agent:
1840 SW 4TH FLOO	22ND ST.			
MIAMI, FL The above	33145 US	statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
MIAMI, FL The above n the Stat	33145 US e named entity submits this	·	ourpose of changing its registere	ed office or registered agent, or both,
MIAMI, FL The above n the Stat	33145 US e named entity submits this e of Florida.			ed office or registered agent, or both, Date
MIAMI, FL The above n the Stat SIGNATU n accordar	33145 US e named entity submits this e of Florida. RE: STPHEN DEMOLINA	e of Registered Ag	ent	
MIAMI, FL The above n the Stat SIGNATU n accordar Election Ca	and an analysis and an analysi	e of Registered Ag	ent ot receive the prior notice.	
MIAMI, FL The above n the Stat SIGNATU n accordar Election Ca	anamed entity submits this e of Florida. RE: STPHEN DEMOLINA Electronic Signature ince with s. 607.193(2)(b), F.S., toppaign Financing Trust Fund	e of Registered Ag	ent ot receive the prior notice.	Date
MIAMI, FL The above n the Stat SIGNATU n accordar Election Ca OFFICER Value: Address:	anamed entity submits this e of Florida. RE: STPHEN DEMOLINA Electronic Signature with s. 607.193(2)(b), F.S., to the mpaign Financing Trust Fund S AND DIRECTORS: PD () Delete DE MOLINA, STEPHEN 11525 S QUAYSIDE DR	e of Registered Ag	ent of receive the prior notice. ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: STEPHEN DEMOLINA PRES 12/11/2006