2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P05000064965 06 NOV -6 PM 12: 24 M.G. INTERNATIONAL CONSULTING, INC. SECHLIAN LATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address ZEMENTWERK 1/1 ZEMENTWERK 1/1 BAD RAPPENAU, GERMANY, GE 74906 BAD RAPPENAU, GERMANY, GE 74906 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. Cape Coral Parkway #300 Cape Coral Parkway #300 City & State 4. FEI Number City & State Cape Coral 84-1684842 Cape Coral Not Applicable Zip 33904 \$8.75 Additional 5. Certificate of Status Desired FLorida Florida 6. Name and Address of Current Registered Agent Name and Address of New Registered Agent PRESIDENTIAL SERVICES INCORPORATED 1217 CAPE CORAL PARKWAY #300 CAPE CORAL, FL 33904 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or the obligations of registered agent. 10/24/06 SIGNATURE. Signature, typed or printed name of FILE NOWIII FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the After January 1, 2007, Fee will be \$300.00 corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE Addltion Delete Change GIERSBERG, KLAUS Gieisberg, Evi NAME NAME STREET ADDRESS ZEMENTWERK 1/1 STREET ADDRESS Zementwerk 1/1 CITY-ST-ZIP BAD RAPPENAU, GERMANY, GE 74908 CITY-ST-ZIP Bad Rappenyu, Germany, GE 74906 TITLE ☐ Delete TITLE X Addition Olbrich , Raswitha NAME NAME STREET ADDRESS STREET ADDRESS Oberscheid 9 Lohmar, Germany, GE 53797 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change TITLE ☐ Delete TITLE NAME NAME 300081552663 STREET ADDRESS STREET ADDRESS 11/06/06--01037--010 **150.00 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. Klaus Giersberg D SIGNATURE: _ Daytime Phone

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