

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000073907

FILED
Mar 21, 2008
Secretary of State

Entity Name: 24 HOUR INVESTMENT CORP.

Current Principal Place of Business:

13245 ATLANTIC BLVD
4-306
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

13245 ATLANTIC BLVD
4-306
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 01-0836017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEPIN-DONAT, CRAIG S
904 SHIPWATCH DR.
JACKSONVILLE, FL, FL 32225 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: CRAIG S. PEPIN-DONAT

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: CEO () Delete
Name: PEPIN-DONAT, CRAIG S
Address: 13245 ATLANTIC BLVD., SUITE 4-306
City-St-Zip: JACKSONVILLE, FL 32225

Title: SEC () Delete
Name: LOEW, ADAM
Address: 13245 ATLANTIC BLVD., SUITE 4-306
City-St-Zip: JACKSONVILLE, FL 32225

Title: MEMB () Delete
Name: DOULGEROPOULUS, DENIS
Address: 13245 ATLANTIC BLVD., SUITE 4-306
City-St-Zip: JACKSONVILLE, FL 32225

Title: MEMB () Delete
Name: PAPPOUS, KONSTANTINOS
Address: 13245 ATLANTIC BLVD., SUITE 4-306
City-St-Zip: JACKSONVILLE, FL 32225

Title: MEMB () Delete
Name: HARBICH, DON
Address: 13245 ATLANTIC BLVD., SUITE 4-306
City-St-Zip: JACKSONVILLE, FL 32225

Title: MEMB () Delete
Name: LOEW, STEPHEN M
Address: 13245 ATLANTIC BLVD., SUITE 4-306
City-St-Zip: JACKSONVILLE, FL 32225

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:

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 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: CRAIG S. PEPIN-DONAT

CEO

03/21/2008

Electronic Signature of Signing Officer or Director

Date