2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 22, 2006
Secretary of State

DOCUMENT# P05000085617

Entity Name: MAINTAIN SECURITIES, INC.

Current Principal Place of Business:

5469 HAVERFORD WAY
LAKE WORTH, FL 334636678

New Principal Place of Business:

450 CAPISTRANO DRIVE
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

5469 HAVERFORD WAY
LAKE WORTH, FL 334636678

New Mailing Address:

450 CAPISTRANO DRIVE
PALM BEACH GARDENS, FL 33410

FEI Number: 20-5588036 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, ANDREW
5469 HAVERFORD WAY
LAKE WORTH, FL 334636678 US

Name and Address of New Registered Agent:

GAMBOA, MICHAEL
450 CAPISTRANO DRIVE
PALM BEACH GARDESN, FL 33410 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: MICHAEL GAMBOA 09/22/2006
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: DP ( ) Delete
Name: JONES, ANDREW
Address: 5469 HAVERFORD WAY
City-St-Zip: LAKE WORTH, FL 334636678

Title: DV (X) Delete
Name: GAMBOA, MICHAEL
Address: 5469 HAVERFORD WAY
City-St-Zip: LAKE WORTH, FL 334636678

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GAMBOA, MICHAEL
Address: 450 CAPISTRANO DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

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

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: MICHAEL GAMBOA PD 09/22/2006
Electronic Signature of Signing Officer or Director Date