2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000089501

Entity Name: BREAK THE RULES MARKETING, INC.

FILED Jan 16, 2007 Secretary of State

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

100 S PINE ISLAND RD STE 144 6420 CONGRESS AVENUE PLANTATION, FL 33324 BOCA RATON, FL 33487

Current Mailing Address: New Mailing Address:

PO BOX 294061 100 S PINE ISLAND RD STE 144

PLANTATION, FL 33324 BOCA RATON, FL 33429

FEI Number: 34-2050351 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

KALICK, BRUCE JONES, ELLIOT T C/O KALICK ASSOCIATES DANIELS AND ROBERTS 100 S. PINE ISLAND RD., STE. 144 6420 CONGRESS AVENUE PLANTATION, FL 33324 US BOCA RATON, FL 33487 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: ELLIOT T JONES 01/16/2007

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

MUGGEO, DAN Name: Name: MUGGEO, DAN 100 S PINE ISLAND RD STE 144 6420 CONGRESS AVENUE Address: Address:

City-St-Zip: PLANTATION, FL 33324 City-St-Zip: BOCA RATON, FL 33487

Title: VD Title: VSD (X) Change () Addition () Delete Name: JONES, ELLIOT Name: JONES, ELLIOT T

100 S PINE ISLAND RD STE 144 6420 CONGRESS AVENUE Address: Address:

PLANTATION, FL 33324 BOCA RATON, FL 33487 City-St-Zip: City-St-Zip:

Title: Title: VSD () Delete VD (X) Change () Addition

KALICK, BRUCE Name: KALICK, BRUCE Name:

100 S PINE ISLAND RD STE 144 6420 CONGRESS AVENUE Address: Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: BICA RATON, FL 33487

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: ELLIOT T JONES **VSD** 01/16/2007