

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000093146

FILED
Oct 04, 2006
Secretary of State

Entity Name: GET SMOKED, INC.

Current Principal Place of Business:

4003 W. OHIO AVE.
TAMPA, FL 33616

New Principal Place of Business:

Current Mailing Address:

4003 W. OHIO AVE.
TAMPA, FL 33616

New Mailing Address:

FEI Number: 20-3078054

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPINOS, PETER
2102 W. CASS STREET
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

SERINO, LESLIE G
1210 VERSANT DRIVE
#104
BRANDON, FL 33511 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: LESLIE SERINO

10/04/2006

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: P () Delete
Name: KAPINOS, PETER
Address: 4003 W. OHIO AVENUE
City-St-Zip: TAMPA, FL 33616 US

Title: VP () Delete
Name: ENGEL, CRAIG
Address: 629 GOLF AND SEA BLVD
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: T () Delete
Name: GOETZ, MICHAEL
Address: 16216 BONNEVILLE DRIVE
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: KAPINOS, PETER
Address: 4003 W. OHIO AVENUE
City-St-Zip: TAMPA, FL 33616

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: PETER KAPINOS

PRES

10/04/2006

Electronic Signature of Signing Officer or Director

Date