

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000111423

FILED
Feb 14, 2007
Secretary of State

Entity Name: FRONTERRA DE PAZ, INC.

Current Principal Place of Business:

101 ONIEDO ST.
GULF BREEZE, FL 32561 US

New Principal Place of Business:

409 CANTERBURY LANE
GULF BREEZE, FL 32561 US

Current Mailing Address:

101 ONIEDO ST.
GULF BREEZE, FL 32561 US

New Mailing Address:

PO BOX 189
GULF BREEZE, FL 32562 US

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

Name and Address of Current Registered Agent:

HICKEY, RAYMOND G
913 GULF BREEZE PKWY
SUITE 5
GULF BREEZE, FL 32561 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: RAYMOND HICKEY

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: D () Delete
Name: PAPAJOHN, GREG
Address: 101 OUIEDO ST.
City-St-Zip: GULF BREEZE, FL 32561 US

Title: D. () Delete
Name: EDDY, EDWIN
Address: 101 OUIEDO ST.
City-St-Zip: GULF BREEZE, FL 32561 US

Title: D. (X) Delete
Name: MUSMANSKY, SCOTT
Address: 101 OUIEDO ST.
City-St-Zip: GULF BREEZE, FL 32561 US

Title: D. (X) Delete
Name: CEDARQUIST, DAVID
Address: 101 OUIEDO ST.
City-St-Zip: GULF BREEZE, FL 32561 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PAPAJOHN, GREG
Address: PO BOX 189
City-St-Zip: GULF BREEZE, FL 32562 US

Title: D (X) Change () Addition
Name: JOHN H, POWELL
Address: PO BOX 189
City-St-Zip: GULF BREEZE, FL 32562 US

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 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: GREG PAPAJOHN

D

02/14/2007

Electronic Signature of Signing Officer or Director

Date