2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000136487

Entity Name: PROCESSINGONWEB CENTER, INC

DELRAY BEACH, FL 33483 US

City-St-Zip:

FILED Mar 29, 2007 Secretary of State

| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
|---|---|--|---|--|--|
| 100 E. LIN SUITE 204 | TON BLVD | | | | |
| | BEACH, FL 3348; | 3 US | | | |
| Current Mailing Address: | | | New Mailing Addres | New Mailing Address: | |
| SUITE 204 | TON BLVD IB BEACH, FL 3348(| 3 US | | | |
| | • | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired (X) | |
| | | rent Registered Agent: | | of New Registered Agent: | |
| warne and | Address of Cur | rent Registered Agent: | Name and Address of | or New Registered Agent: | |
| SUITE 402 | TON BLVD | 3 US | | | |
| | named entity sub of Florida. | omits this statement for the | purpose of changing its registere | ed office or registered agent, or both, | |
| SIGNATUR | RE: KUMAR MIS | RA | | | |
| | Electronic | Signature of Registered Ag | ent | Date | |
| | • |)(b), F.S., the corporation did notes that the contribution (). | ot receive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P () De MISRA, KUMAR 100 E. LINTON BL DELRAY BEACH, I | VD,SUITE 402B | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | VP () De MISRA, RAM D 100 E. LINTON BL' | | Title: Name: Address: | () Change () Addition | |

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: FRAN PENA ADMI 03/29/2007