

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000139860

FILED  
Sep 18, 2006  
Secretary of State

**Entity Name:** BLACK BOX TRANSFERS, INC.

**Current Principal Place of Business:**

418 HORSE CLUB AVE.  
CLEWISTON, FL 33440

**New Principal Place of Business:**

**Current Mailing Address:**

418 HORSE CLUB AVE.  
CLEWISTON, FL 33440

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

PEREZ, MICHAEL  
287 PARK BLVD.  
MIAMI, FL 33126 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: IRAN DAVID PEREZ

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: PEREZ, IRAN D  
Address: 418 HORSE CLUB AVE.  
City-St-Zip: CLEWISTON, FL 33440

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: IRAN DAVID PEREZ

MR

09/18/2006

Electronic Signature of Signing Officer or Director

Date