

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000145351

Entity Name: INTEGRECON, INC.

FILED  
Feb 25, 2007  
Secretary of State

**Current Principal Place of Business:**

25191 KILLDEER DRIVE  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

**Current Mailing Address:**

25191 KILLDEER DRIVE  
BONITA SPRINGS, FL 34135

**New Mailing Address:**

FEI Number: 20-3708301

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ANDALMAN, MATTHEW  
25191 KILLDEER DRIVE  
BONITA SPRINGS, FL 34135 US

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

ANDALMAN, MATTHEW L MR.  
25191 KILLDEER DRIVE  
BONITA SPRINGS, FL 34135 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: MATTHEW ANDALMAN

02/25/2007

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:**

Title: PVST ( ) Delete  
Name: ANDALMAN, MATTHEW  
Address: 25191 KILLDEER DRIVE  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D ( ) Delete  
Name: ANDALMAN, MATTHEW  
Address: 25191 KILLDEER DRIVE  
City-St-Zip: BONITA SPRINGS, FL 34135

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

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: MATTHEW ANDALMAN

PVST

02/25/2007

Electronic Signature of Signing Officer or Director

Date