2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000160397

Entity Name: BALLISTIC ENTERPRISES, INC.

FILED Nov 13, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

24001 GOLDEN EAGLE LN. 11171 PALMETTO RIDGE DR. BONITA SPRINGS, FL 34135 US NAPLES, FL 34110

Current Mailing Address: New Mailing Address:

24001 GOLDEN EAGLE LN. 11171 PALMETTO RIDGE DR. BONITA SPRINGS, FL 34135 US NAPLES, FL 34110

FEI Number: 20-3901107 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HOLLOWAY, CHRISTOPHER HOLLOWAY, CHRISTOPHER 24001 GOLDEN EAGLE LN. 11171 PALMÉTTO RIDGE DR. BONITA SPRINGS, FL 34135 US NAPLES, FL 34110

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: CHRISTOPHER HOLLOWAY 11/13/2006

> 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: PSTD () Delete HOLLOWAY, CHRISTOPHER Name: 24001 GOLDEN EAGLE LN. Address: City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: () Delete Name: SCHAEFFER, JONATHAN 1981 ROOKERY BAY DRIVE # 508 Address:

NAPLES, FL 34114 US City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: **PSTD** (X) Change () Addition HOLLOWAY, CHRISTOPHER Name: 11171 PALMETTO RIDGE DR. Address: City-St-Zip: NAPLES, FL 34110 US

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: CHRISTOPHER HOLLOWAY **PSTD** 11/13/2006