2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000163318

Entity Name: ONSITE DEVELOPMENT GROUP INC.

FILED Sep 19, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Cilrrent Principal Place of Bliginess	NAW Principal Place of Kilsiness

2612 MOUNT ROYAL PLACE 1616 SMITHFIELD WAY CHULUOTA, FL 32766 SUITE 1072

OVIEDO, FL 32765

Current Mailing Address: New Mailing Address:

2612 MOUNT ROYAL PLACE
CHULUOTA, FL 32766
CHULUOTA, FL 32766
SUITE 1072
OVIEDO, FL 32765

FEI Number: 20-3943899 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:

KAPLAN, DAVID 2612 MOUNT ROYAL PLACE CHULUOTA, FL 32766 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: DAVID KAPLAN

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: PRES (X) Change () Addition

Name: KAPLAN, DAVID Name: KAPLAN, DAVID

Address: 2612 MOUNT ROYAL PLACE Address: 2612 MOUNT ROYAL PLACE City-St-Zip: CHULUOTA, FL 32766 City-St-Zip: CHULUOTA, FL 32766

Title: D (X) Delete Title: () Change () Addition

 Name:
 LWIN, MICHAEL
 Name:

 Address:
 9837 NONA CREST DRIVEE
 Address:

 City-St-Zip:
 ORLANDO, FL 32835
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DAVID KAPLAN PRES 09/19/2007