

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000010795

FILED  
Dec 08, 2008  
Secretary of State

Entity Name: MAPLE HIGHLAND MANAGEMENT INC.

## Current Principal Place of Business:

5030 CHAMPION BLVD.  
#C-6285  
BOCA RATON, FL 33496

## New Principal Place of Business:

1166 W. NEWPORT CENTER DR.  
SUITE 211  
DEERFIELD BEACH, FL 33442

## Current Mailing Address:

5030 CHAMPION BLVD.  
#C-6285  
BOCA RATON, FL 33496

## New Mailing Address:

1166 W. NEWPORT CENTER DR.  
SUITE 211  
DEERFIELD BEACH, FL 33442

FEI Number: 11-3768297

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOLDIN, ARNOLD S  
5030 CHAMPION BLVD.  
#C-6285  
BOCA RATON, FL 33496 US

## Name and Address of New Registered Agent:

GOLDIN, ARNOLD S  
1166 W. NEWPORT CENTER DR.  
SUITE 211  
DEERFIELD BEACH, FL 33442 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: ARNOLD S. GOLDIN

12/08/2008

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: PD ( ) Delete  
Name: GOLDIN, ARNOLD  
Address: 5030 CHAMPION BLVD., G6285  
City-St-Zip: BOCA RATON, FL 33496

Title: SD (X) Delete  
Name: GOLDIN, MICHAEL  
Address: 5030 CHAMPION BLVD., G6285  
City-St-Zip: BOCA RATON, FL 33496

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GOLDIN, ARNOLD  
Address: 1166 W. NEWPORT CENTER DRIVE, SUITE 211  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: ARNOLD GOLDIN

PD

12/08/2008

Electronic Signature of Signing Officer or Director

Date