## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P06000016282

Entity Name: MY COMPLETE CASE INC.

FILED May 19, 2009 Secretary of State

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

4369 CENTRAL DR 45 FLAMINGO DRIVE

STONE MOUNTAIN, GA 30083 SANTA ROSA BEACH, FL 32459

Current Mailing Address: New Mailing Address:

POB 60418 45 FLAMINGO DRIVE

ST. PETERSBURG, FL 33784 SANTA ROSA BEACH, FL 32459

FEI Number: 27-0136595 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

A 24 SERVICE CO. R.G. SAMUELS 2901 58TH AVE N 45 FLAMINGO DRIVE

ST. PETERSBURG, FL 33714 US SANTA ROSA BEACH, FL 32459 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: RONALD SAMUELS 05/19/2009

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

 Name:
 SAMUELS, RONALD
 Name:
 BURNINGHAM, STEVEN D PRES

Address: 4369 CENTRAL DR Address: 3737 VIA TORTOLA
City-St-Zip: STONE MOUNTAIN, GA 30083 City-St-Zip: RIVERSIDE, CA 92503

 Title:
 ( ) Delete
 Title:
 MRS. ( ) Change (X) Addition

 Name:
 Name:
 SAMUELS, SUSAN E SEC/TRE

 Address:
 Address:
 4369 CENTRAL DRIVE

 City-St-Zip:
 City-St-Zip:
 STONE MOUNTAIN, GA 30083

Title: ( ) Delete Title: MR. ( ) Change (X) Addition

 Name:
 Name:
 SAMUELS, RONALD G VP

 Address:
 Address:
 45 FLAMINGO DRIVE

 City-St-Zip:
 City-St-Zip:
 SANTA ROSA BEACH, FL 32459

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: RONALD SAMUELS VP 05/19/2009