

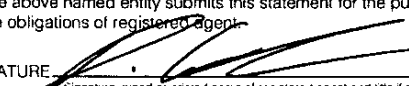
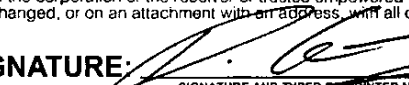


# 2008 FOR PROFIT CORPORATION REINSTATEMENT

<b>DOCUMENT # P06000023449</b> 1. Entity Name <b>WHITE TECHNOLOGIES GROUP, INC.</b>						<b>FILED</b> <b>08 NOV -3 PM 4:18</b> <b>SECRETARY OF STATE</b> <b>TALLAHASSEE, FLORIDA</b>	
Principal Place of Business <b>6700 BROKEN SOUND PARKWAY</b> <b>SUTIE 203</b> <b>BOCA RATON, FL 33487</b>				Mailing Address <b>6700 BROKEN SOUND PARKWAY</b> <b>SUTIE 203</b> <b>BOCA RATON, FL 33487</b>			
2. Principal Place of Business - No P.O. Box # <b>12225 200th Street</b>		3. Mailing Address <b>PO Box 970486</b>		 <b>REINSTATEMENT 2008</b>			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 					
City & State <b>Boca Raton, FL</b>		City & State <b>Boca Raton, FL</b>					
Zip <b>33498</b>		Country <b>Palm Beach</b>		Zip <b>33497</b>		Country <b>Palm Beach</b>	
4. FEI Number <b>90-0260106</b>				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent <b>WHITE, DAVID</b> <b>6700 BROKEN SOUND PARKWAY</b> <b>SUTIE 203</b> <b>BOCA RATON, FL 33487</b>				7. Name and Address of New Registered Agent Name <b>David White</b> Street Address (P.O. Box Number is Not Acceptable) <b>12225 200th Street</b> City <b>Boca Raton</b> <b>FL</b> Zip Code <b>33498</b>			
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE <b>10/29/08</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After January 1, 2009, Fee will be \$300.00</b>				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>			
TITLE <b>PST</b> <input type="checkbox"/> Delete NAME <b>WHITE, DAVID</b> STREET ADDRESS <b>6700 BROKEN SOUND PARKWAY, SUITE 203</b> CITY-ST-ZIP <b>BOCA RATON, FL 33487</b>				TITLE <b>PST</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME <b>David White</b> STREET ADDRESS <b>12225 200th Street</b> CITY-ST-ZIP <b>Boca Raton, FL 33498</b>			
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP				TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP			
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP				TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP			
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP				TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP			
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP				TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP			
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP				TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				DATE <b>10/29/08</b> <small>Daytime Phone #</small>			