

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000030916

Entity Name: DME COLLECTIVE, INC.

FILED
Nov 30, 2007
Secretary of State

Current Principal Place of Business:

20335 NE 12 AVE
MIAMI, FL 33179

New Principal Place of Business:

Current Mailing Address:

20335 NE 12 AVE
MIAMI, FL 33179

New Mailing Address:

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

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
92 SADBERRT ROAD
QUINCY, FL 32351 US

Name and Address of New Registered Agent:

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: PAUL SMITH, VP

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: P () Delete
Name: MCDERMONTT, SAMUEL T III
Address: 20335 NE 12 AVE
City-St-Zip: MIAMI, FL 33179

Title: V () Delete
Name: GREEN, BRIAN
Address: 11607 NW 29 ST
City-St-Zip: CORAL SPRINGS, FL 33065

Title: S () Delete
Name: MCDERMONT, SHARON S
Address: 20335 NE 12 AVE
City-St-Zip: MIAMI, FL 33179

Title: V () Delete
Name: MCDERMONT, SAMUEL T JR
Address: 20335 NE 12 AVE
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCDERMOTT, SAMUEL T III
Address: 20335 NE 12 AVE
City-St-Zip: MIAMI, FL 33179

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: MCDERMOTT, SHARON S
Address: 20335 NE 12 AVE
City-St-Zip: MIAMI, FL 33179

Title: V (X) Change () Addition
Name: MCDERMOTT, SAMUEL T JR
Address: 20335 NE 12 AVE
City-St-Zip: MIAMI, FL 33179

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: SAMUEL T MCDERMOTT III

P

11/30/2007

Electronic Signature of Signing Officer or Director

Date