

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000041851

Entity Name: SAY HELLO USA.COM INC.

FILED
Nov 08, 2007
Secretary of State

Current Principal Place of Business:

5800 SW 25TH STREET
SUITE 1
HOLLYWOOD, FL 33023

New Principal Place of Business:

Current Mailing Address:

5800 SW 25TH STREET
SUITE 1
HOLLYWOOD, FL 33023

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:

EMMANUEL, JOSEPH
5800 SW 25TH. STREET
SUITE 1
HOLLYWOOD, FL, FL 33023 US

Name and Address of New Registered Agent:

PARKER, MICHAEL
5800 SW 25TH. STREET
SUITE 1
HOLLYWOOD, FL, FL 33023 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: MICHAEL PARKER

11/08/2007

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: EMMANUEL DAVID, JOSEPH
Address: 5800 SW 25TH STREET
City-St-Zip: HOLLYWOOD, FL 33023

Title: SEC () Delete
Name: JEAN ANGELICA, ANCILLA
Address: 21220 N MIAMI AVE
City-St-Zip: NORTH MIAMI, FL 33169

Title: VP (X) Delete
Name: RAMLAL MARION, HORTENSE
Address: 79 CHAUSSEE ROAD
City-St-Zip: CASTRIES, WI ST. LUCIA

Title: TRE (X) Delete
Name: LAVALASSE, IVENS
Address: 9300 NW 3RD. AVENUE
City-St-Zip: MIAMI SHORES, FL 33150

Title: AVP (X) Delete
Name: EMMANUEL MAGREGOR, HOWARD
Address: 79 CHAUSSEE ROAD
City-St-Zip: CASTRIES, WI ST. LUCIA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PARKER, MICHAEL
Address: 5800 SW 25TH STREET
City-St-Zip: HOLLYWOOD, FL 33023

Title: VP (X) Change () Addition
Name: DEAN, JOSEPH
Address: 2000 NW 185 STREET
City-St-Zip: MIAMI GARDENS, FL 33056

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

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

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: MICHAEL PARKER

P

11/08/2007

Electronic Signature of Signing Officer or Director

Date