

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000081319

Entity Name: BIKER BALM PRODUCTS, INC.

FILED
Oct 11, 2007
Secretary of State

Current Principal Place of Business:

903 S DELAWARE AVE
TAMPA, FL 33606

New Principal Place of Business:

701 SOUTH HOWARD AVE
106336
TAMPA, FL 33606

Current Mailing Address:

903 S DELAWARE AVE
TAMPA, FL 33606

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:

INGLIS, JOHN S
101 E KENNEDY BLVD STE 2800
TAMPA, FL 33602 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: JOHN INGLIS

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: D () Delete
Name: WALLER, EDWARD A JR.
Address: 903 S DELAWARE AVE
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: WALLER, JUDITH T
Address: 903 S DELAWARE AVE
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: MASTERS, RANDY
Address: 903 S DELAWARE AVE
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: EDWARD A WALLER

D

10/11/2007

Electronic Signature of Signing Officer or Director

Date