

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000104157

**FILED**  
**Jan 30, 2008**  
**Secretary of State**

**Entity Name:** WORLD BUSINESS XCHANGE GROUP INC

**Current Principal Place of Business:**

516 CINNAMON PLACE  
NASHVILLE, TN 37211 US

**New Principal Place of Business:**

1925 ASHLAND CITY HIGHWAY  
#607  
CLARKSVILLE, TN 37043 US

**Current Mailing Address:**

516 CINNAMON PLACE  
NASHVILLE, TN 37211 US

**New Mailing Address:**

1925 ASHLAND CITY HIGHWAY  
#607  
CLARKSVILLE, TN 37043 US

**FEI Number:** 20-5371845

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FLORIDA-INCORPORATIONS.NET INC  
3219 CORAL RIDGE DR.  
CORAL SPRINGS, FL 33065 US

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

CMC INTERNATIONAL ACQUISITIONS & HOLDINGS  
6574 NORTH STATE ROAD 7  
#401  
COCONUT CREEK, FL 33073 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: NEAL RAHMAN

01/30/2008

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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P ( ) Change (X) Addition  
Name: WEAR, HOWARD  
Address: 1925 ASHLAND CITY HIGHWAY, #607  
City-St-Zip: CLARKSVILLE, TN 37043 US

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: HOWARD WEAR

P

01/30/2008

Electronic Signature of Signing Officer or Director

Date