

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000106158

Entity Name: UAPPLY, INC.

FILED
Oct 20, 2008
Secretary of State

Current Principal Place of Business:

10066 PACIFIC PINES AVE
FT MYERS, FL 33912

New Principal Place of Business:

4207 S. DALE MABRY HWY.
4208
TAMPA, FL 33611

Current Mailing Address:

10066 PACIFIC PINES AVE
FT MYERS, FL 33912

New Mailing Address:

4207 S. DALE MABRY HWY.
4208
TAMPA, FL 33611

FEI Number: 20-5553187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLEISHOUR, MICHAEL
10066 PACIFIC PINES AVE
FT MYERS, FL 33912 US

Name and Address of New Registered Agent:

FLEISHOUR, MICHAEL S
4207 S. DALE MABRY HWY.
4208
TAMPA, FL 33611 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 S. FLEISHOUR

10/20/2008

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: P () Delete
Name: FLEISHOUR, MICHAEL
Address: 10066 PACIFIC PINES AVE
City-St-Zip: FT MYERS, FL 33912

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FLEISHOUR, MICHAEL S
Address: 4207 S DALE MABRY HWY. STE. 4208
City-St-Zip: TAMPA, FL 33611

Title: CTO () Change (X) Addition
Name: MOTIUR, BHUIYAN
Address: 464 SUN LAKE CIRCLE APT. 206
City-St-Zip: LAKE MARY, FL 32746

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 S. FLEISHOUR

P

10/20/2008

Electronic Signature of Signing Officer or Director

Date