

**2007 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Dec 13, 2007  
Secretary of State**

DOCUMENT# P06000110805

Entity Name: EDWARDS BUSINESS ENTERPRISE INC

**Current Principal Place of Business:**

11339 FORESTDALE RD  
JACKSONVILLE, FL 32218 US

**New Principal Place of Business:**

**Current Mailing Address:**

11339 FORESTDALE RD  
JACKSONVILLE, FL 32218 US

**New Mailing Address:**

FEI Number: 20-5445022      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

EDWARDS, ANTHONY  
11339 FORESTDALE RD  
JACKSONVILLE, FL 32218 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: A. EDWARDS

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: EDWARDS, ANTHONY  
Address: 11339 FORESTDALE RD  
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: VP ( ) Delete  
Name: EDWARDS, NOVELLETTE  
Address: 11339 FORESTDALE RD  
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: S ( ) Delete  
Name: EDWARDS, LATOY  
Address: 11339 FORESTDALE RD  
City-St-Zip: JACKSONVILLE, FL 32218 US

**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: A. EDWARDS

Electronic Signature of Signing Officer or Director

P

12/13/2007

Date