

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000111904

Entity Name: CREATE MY SCENE, INC.

FILED
Feb 05, 2009
Secretary of State

Current Principal Place of Business:

2410 WEST AZEELE ST
239
TAMPA, FL 33609

New Principal Place of Business:

3111 W. DR. MARTIN LUTHER KING JR. BLVD
100
TAMPA, FL 33607

Current Mailing Address:

2410 WEST AZEELE ST
239
TAMPA, FL 33609

New Mailing Address:

3111 W. DR. MARTIN LUTHER KING JR. BLVD
100
TAMPA, FL 33607

FEI Number: 20-5460000

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEESMAN, ROBERT J
4502 CHARRO LANE
PLANT CITY, FL 33565 US

Name and Address of New Registered Agent:

LEESMAN, ROBERT J
6319 S HAROLD AVE
TAMPA, FL 33616 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: ROBERT J LEESMAN

02/05/2009

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: LEESMAN, ROBERT J
Address: 2410 WEST AZEELE ST STE 239
City-St-Zip: TAMPA, FL 33609

Title: D (X) Delete
Name: KNAUFF, JEREMY L
Address: 3111 W DR. MARIN LUTHER KING BLVD STE 100
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEESMAN, ROBERT J
Address: 6319 S HAROLD AVE
City-St-Zip: TAMPA, FL 33616

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: ROBERT J LEESMAN

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02/05/2009

Electronic Signature of Signing Officer or Director

Date