2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 15, 2009
Secretary of State

DOCUMENT# P07000064116

Entity Name: CALDWELL MERLINO & BERNSTEIN INVESTMENTS, INC.

Current Principal Place of Business:

5850 CORAL RIDGE DR.
STE 315
POMPANO BEACH, FL 33076

New Principal Place of Business:

Current Mailing Address:

5850 CORAL RIDGE DR.
STE 315
POMPANO BEACH, FL 33076

New Mailing Address:

FEI Number: 26-0426669 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAILEY, ABE A
18350 N.W. SECOND AVENUE, SUITE 500
MIAMI, FL 33169 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: ANNA CAMCAM

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:	PRES	( ) Delete
Name:	REYNOLDS, JAY L	
Address:	5850 CORAL RIDGE DR. STE 315	
City-St-Zip:	CORAL SPRINGS, FL 33076	
Title:	TRES	( ) Delete
Name:	REYNOLDS, ADRIENNE C	
Address:	5850 CORAL RIDGE DR, STE 315	
City-St-Zip:	CORAL SPRINGS, FL 33076	
Title:	SECT	( ) Delete
Name:	REYNOLDS, JADE C	
Address:	5850 CORAL RIDGE DR STE 315	
City-St-Zip:	CORAL SPRINGS, FL 33076	
Title:	DIR	( ) Delete
Name:	REYNOLDS, JAY L	
Address:	5850 CORAL RIDGE DR, STE 315	
City-St-Zip:	CORAL SPRINGS, FL 33076	
Title:	P	( ) Delete
Name:	REYNOLDS, ADRIENNE	
Address:	5850 CORAL RIDGE DR., STE. 301	
City-St-Zip:	POMPANO BEACH, FL 33076	
Title:	T	( ) Delete
Name:	REYNOLDS, JADE	
Address:	5850 CORAL RIDGE DR., STE. 301	
City-St-Zip:	POMPANO BEACH, FL 33076	

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:	
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: ANNA CAMCAM MGR 10/15/2009

Electronic Signature of Signing Officer or Director — Date