

**2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000108444

**FILED  
Oct 12, 2010  
Secretary of State**

**Entity Name:** NEGATIVE REINFORCEMENT SHIRTS, INC.

**Current Principal Place of Business:**

2 ROBBEN TERRACE  
DAYTONA BCH, FL 32118

**New Principal Place of Business:**

**Current Mailing Address:**

2 ROBBEN TERRACE  
DAYTONA BCH, FL 32118

**New Mailing Address:**

**FEI Number:** 26-1249790

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REGAR, KR/, BILLY  
2 ROBBEN TERRACE  
DAYTONA BCH, FL 32118 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: BILLY REGAR JR.

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DPVT  
Name: REGAR, JR., BILLY  
Address: 2 ROBBEN TERRACE  
City-St-Zip: DAYTONA BCH, FL 32118

Title: S  
Name: REGAR, JR., BILLY  
Address: 2 ROBBEN TERRACE  
City-St-Zip: DAYTONA BCH, FL 32118

I hereby 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 all other like empowered.

SIGNATURE: BILLY REGAR JR.

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DPVT

10/12/2010

\_\_\_\_\_  
Date