

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000040144

FILED  
Nov 24, 2009  
Secretary of State

Entity Name: CASH FLOW MERCHANT, INC.

## Current Principal Place of Business:

3111 W DR M L KING BLVD  
SUITE 100  
TAMPA, FLORIDA, 33607

## New Principal Place of Business:

111 2ND AVENUE N.E.  
SUITE 919  
ST PETERSBURG, FL 33701

## Current Mailing Address:

3111 W DR M L KING BLVD  
SUITE 100  
TAMPA, FLORIDA, 33607

## New Mailing Address:

111 2ND AVENUE N.E.  
SUITE 919  
ST PETERSBURG, FL 33701

FEI Number: 80-0175525

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WILSON, LORENZO  
3111 W DR M L KING BLVD  
SUITE 100  
TAMPA, FL 33607 US

## Name and Address of New Registered Agent:

WILSON, LORENZO  
111 2ND AVENUE N.E.  
SUITE 919  
ST. PETERSBURG, FL 33701 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: LORENZO WILSON

11/24/2009

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: PRE ( ) Delete  
Name: WILSON, LORENZO  
Address: 3111 W DR M L KING BLVD., SUITE 100  
City-St-Zip: TAMPA, FL 33607

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRE (X) Change ( ) Addition  
Name: WILSON, LORENZO  
Address: 111 2ND AVENUE N.E. SUITE 919  
City-St-Zip: ST PETERSBURG, FL 33701

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: LORENZO WILSON

PRE

11/24/2009

Electronic Signature of Signing Officer or Director

Date