

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P09000000213

FILED
Oct 27, 2009
Secretary of State

Entity Name: BLAIR'S MANAGEMENT GROUP INC.

Current Principal Place of Business:

1075 SUNSET STRIP, SUITE 212
FT. LAUDERDALE, FL 33312

New Principal Place of Business:

6412 N UNIVERSITY DR.
SUITE 121
TAMARAC, FL 33321

Current Mailing Address:

1075 SUNSET STRIP, SUITE 212
FT. LAUDERDALE, FL 33312

New Mailing Address:

6412 N UNIVERSITY DR.
SUITE 121
TAMARAC, FL 33321

FEI Number: 26-4063291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAIR, NIGEL
1075 SUNSET STRIP, SUITE 212
FT. LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

BLAIR, NIGEL
1633 NW 91ST AVE.
CORAL SPRINGS, FL 33371 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: NIGEL BLAIR

10/27/2009

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: PSTD () Delete
Name: BLAIR, NIGEL
Address: 1075 SUNSET STRIP, SUITE 212
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: VD () Delete
Name: BLAIR, MAXINE
Address: 1075 SUNSET STRIP, SUITE 212
City-St-Zip: FT. LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: BLAIR, MAXINE E
Address: 1633 NW 91ST AVE.
City-St-Zip: CORAL SPRINGS, FL 33371

Title: VD (X) Change () Addition
Name: BLAIR, NIGEL
Address: 1633 NW 91ST AVE.
City-St-Zip: CORAL SPRINGS, FL 33312

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: MAXINE BLAIR

PSTD

10/27/2009

Electronic Signature of Signing Officer or Director

Date