

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000049895

**FILED**  
**Dec 06, 2010**  
**Secretary of State**

**Entity Name:** THE LIEN,TAG & TITLE TEAM INC.

**Current Principal Place of Business:**

5613 FUNSTON STREET  
HOLLYWOOD, FL 33023 US

**New Principal Place of Business:**

5834 DAWSON STREET  
HOLLYWOOD, FL 33023 US

**Current Mailing Address:**

5613 FUNSTON STREET  
HOLLYWOOD, FL 33023 US

**New Mailing Address:**

5834 DAWSON STREET  
HOLLYWOOD, FL 33023 US

**FEI Number:** 27-0325453

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHER, MORT  
5613 FUNSTON STREET  
HOLLYWOOD, FL 33023 US

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

KALLMANN, ROBERT D  
1020 SW 94TH AVENUE  
PLANTATION, FL 33324 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 D. KALLMANN

12/06/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KALLMANN, ROBERT D  
Address: 1020 S.W. 94TH AVENUE  
City-St-Zip: PLANTATION, FL 33324 US

Title: VP  
Name: KALLMANN, DIANE  
Address: 1020 S.W. 94TH AVENUE  
City-St-Zip: PLANTATION, FL 33324

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: ROBERT D. KALLMANN

P

12/06/2010

Electronic Signature of Signing Officer or Director

Date