2005 FOR PROFIT CORPORATION - REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 OCT 19 PM 1:58

REINSTATEMENT 05

DOCUMENT # P20998

1. Entity Name
TRAKKER MAPS, INC.

Principal Place of Business	Mailing Address
8350 PARKLINE BLVD. SUITE 360 ORLANDO, FL 32809	6440 GENERAL GREEN WAY ALEXANDRIA, VA 22312

10102005 REIN-P CR2E098 (6/04)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc	Suite, Apt. #, etc
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number
65-0061214
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TURCOTTE, MARK 8350 PARKLINE BLVD, SUITE 360 ORLANDO, FL 32809	Name: John McKay Street Address (P.O. Box Number is Not Acceptable): 6000 So. Rio Grand Ave Suite 207 City: Orlando FL Zip Code: 32809

8. 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. I am familiar with and accept the obligations of registered agent.

SIGNATURE: John McKay
Signature of new registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $750.00
After January 1, 2006, Fee will be $900.00

200060773982
10/19/05--01051--001 **750.00

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
	P/D LANGENSCHEIDT, KARL E T 80807 MUCHEN GERMANY, GE	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	Pres MARC JENNINGS 36-36 33RD Street LONG ISLAND CITY, NY 11106 ☐ Change ☒ Addition
	V DOLGINS, STUART 46-35 54TH ROAD MASPETH, NY 11378	☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	EVP John McKay 36-36 33rd St Long Island City, NY 11106 ☐ Change ☒ Addition
	M TURCOTTE, MARK 8350 PARKLINE BLVD, SUITE 360 ORLANDO, FL 32809	☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
	D LANGENSCHEIDT, ANDREAS T 80807 MUNCHEN WEST GERMANY,	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
	DOS ROLLINS, ROBERT 6440 GENERAL GREEN WAY ALEXANDRIA, VA 22312	☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
		☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: John McKay
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE