

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P93000001759

**FILED**  
**Mar 21, 2005**  
**Secretary of State**

**Entity Name:** "O" CORP. OF BREVARD, INC.

**Current Principal Place of Business:**

5200 BABCOCK STREET NE  
SUITE 202A  
PALM BAY, FL 32905

**New Principal Place of Business:**

C/O JACK B. SPIRA, ESQ.  
5205 BABCOCK ST., NE  
PALM BAY, FL 32905

**Current Mailing Address:**

5200 BABCOCK STREET NE  
SUITE 202A  
PALM BAY, FL 32905

**New Mailing Address:**

C/O JACK B. SPIRA, ESQ.  
5205 BABCOCK ST., NE  
PALM BAY, FL 32905

**FEI Number:** 59-3164928

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIRA, JACK B ESQ  
5200 BABCOCK STREET NE  
PALM BAY, FL US

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

SPIRA, JACK B ESQ  
5205 BABCOCK STREET, NE  
PALM BAY, FL 32905 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: JACK B. SPIRA

03/21/2005

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: DPV ( ) Delete  
Name: OLIVEIRA, C M  
Address: 5200 BABCOCK ST, N.E., STE 101  
City-St-Zip: PALM BAY, FL 32905

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: C. M. OLIVEIRA

DPV

03/21/2005

Electronic Signature of Signing Officer or Director

Date