

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P94000045178

**FILED**  
**Nov 23, 2010**  
**Secretary of State**

**Entity Name:** AMERICAN MAGLEV TECHNOLOGY OF FLORIDA, INC.

**Current Principal Place of Business:**

4801 BURROW TRAIL  
POWDER SPRINGS, GA 30127 US

**New Principal Place of Business:**

109 ANDERSON ST  
SUITE 101  
MARIETTA, GA 30060 US

**Current Mailing Address:**

4801 BURROW TRAIL  
POWDER SPRINGS, GA 30127 US

**New Mailing Address:**

109 ANDERSON ST  
SUITE 101  
MARIETTA, GA 30060 US

**FEI Number:** 59-3259683

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OLIVER, LEW  
20751 STATE ROAD 520  
SUITE 120  
ORLANDO, FL 32833 US

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

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:** LEW OLIVER

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** CEO  
**Name:** AMERICAN MAGLEV TECHNOLOGY OF FLORIDA, INC  
**Address:** 109 ANDERSON ST. SUITE 101  
**City-St-Zip:** MARIETTA, GA 30060

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:** TONY MORRIS

TM

11/23/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date