


2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P94000050423 1. Entity Name MERMAID MANUFACTURING OF SOUTHWEST FLORIDA, INC.	
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Principal Place of Business 2651 PARK WINDSOR DR STE 203 FT MYERS, FL 33901	Mailing Address 12670 NEW BRITTANY BLVD STE 101 FORT MYERS, FL 33907
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2. Principal Place of Business	3. Mailing Address	04272005 REIN-P CR2E098 (6/04)
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number 65-0503792
City & State	City & State	Applied For Not Applicable
Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ROYSTON, ROBERT D JR 12670 NEW BRITTANY BLVD STE 101 FORT MYERS, FL 33907	7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____
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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: *Robert D. Royston, Jr.* (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$900.00

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PST	TITLE	7000553367 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BANFIELD, WILLIAM	NAME	05/25/05--01059--006 **900.00
STREET ADDRESS	2651 PARK WINDSOR DR, STE 203	STREET ADDRESS	
CITY-ST-ZIP	FORT MYERS, FL 33901	CITY-ST-ZIP	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

RECEIVED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 MAY 16 PM 12:20
 FILED

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 if changed, or on an attachment with an address, with all other like approvals.

SIGNATURE: *William Banfield* DATE: 4/28/05 Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR