

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000004385

**FILED**  
**Feb 13, 2006**  
**Secretary of State**

**Entity Name:** DEMOGRAPHIC DATA FOR DECISION MAKING, INC.

**Current Principal Place of Business:**

8405 NW 53RD ST.  
SUITE A103  
MIAMI, FL 33166

**New Principal Place of Business:**

9700 SOUTH DIXIE HIGHWAY  
SUITE 500  
MIAMI, FL 33156 US

**Current Mailing Address:**

8405 NW 53RD ST.  
SUITE A103  
MIAMI, FL 33166

**New Mailing Address:**

9700 SOUTH DIXIE HIGHWAY  
SUITE 500  
MIAMI, FL 33156 US

**FEI Number:** 65-0562157

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MCHENRY, JOHN P  
8405 NW 53RD ST.  
SUITE A103  
MIAMI, FL 33166 US

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

MCHENRY, JOHN P  
9700 SOUTH DIXIE HIGHWAY  
SUITE 500  
MIAMI, FL 33156 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: JOHN PERSONS MCHENRY

02/13/2006

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: P ( ) Delete  
Name: MCHENRY, JOHN P  
Address: 8405 NW 53RD ST., SUITE A103  
City-St-Zip: MIAMI, FL

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

Title: DR. (X) Change ( ) Addition  
Name: MCHENRY, JOHN P  
Address: 9927 NW 49 TER  
City-St-Zip: MIAMI, FL 33178 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JOHN PERSONS MCHENRY

DR.

02/13/2006

Electronic Signature of Signing Officer or Director

Date