2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000059676

Entity Name: VENDAK, INCORPORATED

FILED Feb 27, 2005 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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23514 HARPER AVE 6616 MERRYVALE LANE

PORT CHARLOTTE, FL 33980 US PORT ORANGE, FL 32128 US

Current Mailing Address: New Mailing Address:

110 S ATLANTIC AVE NEW SMYRNA BEACH, FL 32169 6616 MERRYVALE LANE PORT ORANGE, FL 32128

FEI Number: 65-0602110 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CUMMINS, JOSEPH P
1100 HEMLOCK STREET
NEW SMYRNA BEACH, FL 32169 US

CUMMINS, JOSEPH P
6616 MERRYVALE LANE
PORT ORANGE, FL 32128 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: JOSEPH P CUMMINS 02/27/2005

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 CUMMINS, JOSEPH P
 Name:
 CUMMINS, JOSEPH P

 Address:
 1100 HEMLOCK STREET
 Address:
 6616 MERRYVALE LANE

 City-St-Zip:
 NEW SMYRNA BEACH, FL 32169
 City-St-Zip:
 PORT ORANGE, FL 32128

Title: V () Delete Title: () Change () Addition

 Name:
 WHIDDEN, ROBERT J
 Name:

 Address:
 24048 WESTCHESTER BOULEVARD
 Address:

 City-St-Zip:
 PORT CHARLOTTE, FL 33980
 City-St-Zip:

Name: WHIDDEN, CINGER S Name: WHIDDEN, GINGER S

Address: 24048 WESTCHESTER BOULEVARD Address: 24048 WESTCHESTER BOULEVARD
City-St-Zip: PORT CHARLOTTE, FL 33980 City-St-Zip: PORT CHARLOTTE, FL 33980

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: JOSEPH P CUMMINS P 02/27/2005