2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000070918

Entity Name: TO BEAN OR NOT TO BEAN, INC.

FILED Dec 17, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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12801 W. SUNRISE BLVD. #1503

SUNRISE, FL 33323 US

Current Mailing Address: New Mailing Address:

18786 DR ANDRES WAY
DELRAY BEACH, FL 33445

12801 W SUNRISE BLVD
#1503
SUNRISE, FL 33323

FEI Number: 65-0608009 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:

MANSFIELD, GARY
1878 - C DR. ANDRAS WAY
DELRAY BEACH, FL 33448 US

MANSFIELD, GARY
3201 NE 183 ST
#1007

ADVENTURA, FL 33160 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: GARY MANSFIELD 12/17/2007

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

Name: MANSFIELD, MURIEL Name: MANSFIELD, MURIEL

Address: 1878 - C DR. ANDRAS WAY Address: 12801 W SUNRISE BLVD #1503

City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: SUNRISE, FL 33323

Title: D () Delete Title: D (X) Change () Addition
Name: MANSFIELD, LAWRENCE
Address: 1878 - C DR. ANDRAS WAY

Title: D (X) Change () Addition
Name: MANSFIELD, LAWRENCE
Address: 12801 W SUNRISE BLVD #1503

City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: SUNRISE, FL 33323

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

 Name:
 MANSFIELD, GARY
 Name:

 Address:
 1878 - C
 DR. ANDRAS WAY
 Address:

 City-St-Zip:
 DELRAY BEACH, FL
 33445
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MURIEL MANSFIELD D 12/17/2007