2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000042709

FILED Oct 09, 2006 Secretary of State

Entity Name: SOUTH OF THE BORDER INTRODUCTIONS INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
5236 MANG BEFFNER, F	O FRUIT ST FL 33584	- US			
Current Mailing Address:			New Mailing Address:		
236 MANG SEFFNER, F	O FRUIT ST FL 33584	US			
El Number: 5	9-3382303	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:		
DAVIS, DAV 5236 MANG SEFFNER, F	O FRUIT ST	us			
he above n the State o		submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
IGNATURE	E: DAVID L.				
ignature		. DAVIS nic Signature of Registered Age	ent	Date	
accordance	Electron	nic Signature of Registered Age 93(2)(b), F.S., the corporation did no		Date	
ı accordance lection Camp	Electron	nic Signature of Registered Age 93(2)(b), F.S., the corporation did no g Trust Fund Contribution().	ot receive the prior notice.	Date ES TO OFFICERS AND DIRECTOR	
accordance lection Camp PFFICERS A tle: ame: ddress:	Electron with s. 607.19 paign Financin AND DIREC	nic Signature of Registered Age 03(2)(b), F.S., the corporation did no og Trust Fund Contribution (). CTORS:) Delete L FRUIT ST	ot receive the prior notice.		
accordance lection Camp DFFICERS A tle: ame: ddress: ity-St-Zip: tle: ame: ddress:	Electrol with s. 607.19 paign Financin AND DIREC D (DAVIS, DAVID 5236 MANGO I SEFFNER, FL	nic Signature of Registered Age 03(2)(b), F.S., the corporation did no 1g Trust Fund Contribution (). CTORS:) Delete L FRUIT ST 33584) Delete TOPHER J FRUIT ST	ot receive the prior notice. ADDITIONS/CHANGE Title: Name: Address: City-St-Zip:	ES TO OFFICERS AND DIRECTOR	

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: DAVID L. DAVIS PRES 10/09/2006	
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