2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000046358

Entity Name: PMTD, INC.

FILED Oct 04, 2010 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

1 JOHN ANDERSON DRIVE #413

ORMOND BEACH, FL 32176

Current Mailing Address: New Mailing Address:

PMTD INC PO BOX 2967

ORMOND BEACH, FL 321752967 US

FEI Number: 59-3422209 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:

HOPPER, E. PETER
1 JOHN ANDERSON DRIVE
#413

ORMOND BEACH, FL 32176 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: E. PETER HOPPER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title:

Name: HOPPER, M. FRANCES
Address: 1 JOHN ANDERSON DR. #413
City-St-Zip: ORMOND BEACH, FL 32176

Title: V

 Name:
 DOUGLAS, HOPPER W

 Address:
 406 OLDE ORCHARD LANE

 City-St-Zip:
 SHELBURNE, VT 05482

Title: D

Name: HOPPER, PETER J Address: 466 JUNIPER RIDGE City-St-Zip: SHELBURNE, VT 05482

Title: ST

Name: HOPPER, TIMOTHY S Address: 17 KEARI LANE

City-St-Zip: SOUTH BURLINGTON, VT 05403

Title: [

Name: HOPPER, MICHAEL A Address: 8 DELA POUDRIERE #106

City-St-Zip: MONTREAL, QUEBEC, CANADA, HG4 3J1

Title: D

Name: COCULUZZI, PAMELA Address: 78 GRENADIER WAY

City-St-Zip: NEPEAN, ONTARIO, CANADA, K2J 4L5

I hereby 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 all other like empowered.

SIGNATURE: W DOUGLAS HOPPER V 10/04/2010