2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000065512

Entity Name: PALM BEACH MARKETING & MANAGEMENT, INC.

FILED Oct 16, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
SUITE 205	MOORE RD ON, FL 33496	US		
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
SUITE 205	MOORE RD ON, FL 33496	US		
FEI Number: 6	65-0684791	FEI Number Applied For () FEI N	umber Not Applicable ()	Certificate of Status Desired ()
Name and	Address of Cu	rrent Registered Agent:	Name and Address	of New Registered Agent:
9878 CLINT 205	IO, ANTHONY MOORE RD ON, FL 33496	US		
The above r in the State		bmits this statement for the purpose	of changing its registere	ed office or registered agent, or both,
SIGNATUR	E: ANTHONY	MANNARINO		
	Electronic	Signature of Registered Agent		Date
	•	2)(b), F.S., the corporation did not receiv	e the prior notice.	
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES () D MANNARINO, AN 9878 CLINT MOC BOCA RATON, FL	RE RD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP (X) E MANNARINO, DAI 9878 CLINT MOO BOCA RATON, FL	RE RD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D (X) E MANNARINO, GIU 9878 CLINT MOC BOCA RATON, FL	RE RD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D (X) D DADDURNO, SAL 9878 CLINT MOC BOCA RATON, FL	RE RD	Title: Name: Address: City-St-Zip:	() Change () Addition
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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: ANTHONY MANNARINO D 10/16/2009