2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000031794

Entity Name: THE LION HEART GROUP, INC.

FILED Oct 30, 2006 Secretary of State

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

1106 S. POWERLINE RD. P.O. BOX 336

POMPANO BEACH, FL 33069 US CLEWISTON, FL 33440 US

Current Mailing Address: New Mailing Address:

PO BOX 667230 P.O. BOX 336

POMPANO BEACH, FL 33066 US CLEWISTON, FL 33440 US

FEI Number: 65-0748401 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:

GOLDMAN, ROBERT E ESQ. 6550 N. FEDERAL HWY., STE. 511 1 EAST BROWARD BLVD. STE 700 FORT LAUDERDALE, FL 33301 US GOLDMAN, ROBERT E ESQ. 1 EAST BROWARD BLVD., STE 700 FORT LAUDERDALE, FL 33301 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: ROBERT E. GOLDMAN 10/30/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: VPD (X) Change () Addition Name: KODISH, KEN Name: KODISH, KEN

 Address:
 289 N E 102ND ST
 Address:
 289 N E 102ND ST

 City-St-Zip:
 MIAMI SHORES, FL 33138
 City-St-Zip:
 MIAMI SHORES, FL 33138

Title: D () Delete Title: PD (X) Change () Addition Name: KODISH, EDWIN Name: MICKLER, ALVA J JR.

 Name:
 KODISH, EDWIN
 Name:
 MICKLER, ALVA J JR.

 Address:
 2128 NW 60TH CIRCLE
 Address:
 1834 DAVIDSON ROAD

 City-St-Zip:
 BOCA RATON, FL 33496
 City-St-Zip:
 CLEWISTON, FL 33440

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

 Name:
 LOIDA, NICOLÁS L
 Name:

 Address:
 834 FIFTH AVE.
 Address:

 City-St-Zip:
 NEW YORK, NY 10021
 City-St-Zip:

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

 Name:
 GLOVER, REYP
 Name:

 Address:
 204 E. 32ND ST.
 Address:

 City-St-Zip:
 CHICAGO, IL 60616
 City-St-Zip:

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: ALVA J. MICKLER, JR. PD 10/30/2006