2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000037560

FILED Oct 10, 2005 Secretary of State

| Entity Na | me: SAUNDERS BR | ROTHERS, INC. | | |
|---|--|--|---|--|
| Current Principal Place of Business: | | | New Principal Place of Business: | |
| | LEY AVENUE UDERDALE, FL 3331 | 2 US | | |
| Current Mailing Address: | | | New Mailing Address: | |
| | LEY AVENUE UDERDALE, FL 3331 | 2 US | | |
| FEI Number | :: 65-0761755 FEI N | Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and | d Address of Curren | t Registered Agent: | Name and Address of | of New Registered Agent: |
| 215 COOL FORT LAU The above | RS, WILLIAM L LEY AVENUE JDERDALE, FL 3331 e named entity submit e of Florida. | | ourpose of changing its registere | d office or registered agent, or both, |
| SIGNATU | RE: WILLIAM L SAL | | | |
| | Electronic Sigi | nature of Registered Ag | ent | Date |
| Election Ca | mpaign Financing Trust | Fund Contribution (). | | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | P () Delete SAUNDERS, WILLLIAN 215 COOLEY AVENUE FORT LAUDERDALE, F | | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: | ST () Delete SAUNDERS, STEPHEN 13744 GIMMIE CT | I | Title: Name: Address: | () Change () Addition |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEPHEN SAUNDERS ST 10/10/2005