

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000011920

Entity Name: TANGENT TOO CORPORATION

FILED
Jan 12, 2006
Secretary of State

Current Principal Place of Business:

11780 US HWY ONE, STE. 300
N. PALM BEACH, FL 33408

New Principal Place of Business:

660 US HWY ONE, THIRD FLOOR
N. PALM BEACH, FL 33408

Current Mailing Address:

11780 US HWY ONE, STE. 300
N. PALM BEACH, FL 33408

New Mailing Address:

660 US HWY ONE, THIRD FLOOR
N. PALM BEACH, FL 33408

FEI Number: 65-0826181

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAILE, SHAW & PFAFFENBERGER, P.A.
11780 US HWY ONE, STE. 300
N. PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

HAILE, SHAW & PFAFFENBERGER, P.A.
660 US HWY ONE, THIRD FLOOR
N. PALM BEACH, FL 33408 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: OREN S. TASINI, ESQ.

01/12/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: REYNOLDS, WILEY R III
Address: 255 S COUNTY ROAD
City-St-Zip: PALM BEACH, FL 33480

Title: VS () Delete
Name: LEE, JEFFREY S
Address: 255 S COUNTY ROAD
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: WILEY R. REYNOLDS, III

DPT

01/12/2006

Electronic Signature of Signing Officer or Director

Date