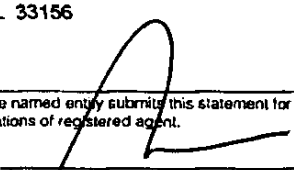
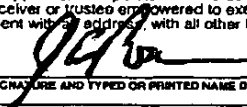


2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P98000027798					
1. Entity Name AMNIS ENERGY, INC.					
Principal Place of Business 77 E. MISSOURI AVE., UNIT #71 PHOENIX, AZ 85012 US			Mailing Address 610 E. BELL ROAD, #2-462 PHOENIX, AZ 85022		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 52-2138061	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
LITTMAN, ERIC P 7695 S.W. 104TH STREET STE. 210 MIAMI, FL 33156				Name United Corporate Services, Inc.	
				Street Address (P.O. Box Number is Not Acceptable)	
				9200 S. Dadeland Blvd-Ste 508 City Miami FL Zip Code 33156	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 				Michael A. Barr-President DATE 9/21/05	
(NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$750.00 After January 1, 2006, Fee will be \$900.00					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD YOUNG, PHILIP M 77 E. MISSOURI AVE., UNIT #71 PHOENIX, AZ 85012	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO Jeffrey A. Powers 1201 Camino Del Mar-Ste 206 Del Mar, CA 92014	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD MARINOV, SALLI 143 W. HELENA PHOENIX, AZ 85023	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 				Jeffrey A. Powers-CEO DATE 23 Sept 05 8584562480	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #	

FILED

05 SEP 28 AM 11:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



09212005 REIN-P CR2E098 (8/04)