2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 10, 2007
Secretary of State

DOCUMENT# P98000070910

Entity Name: T.P.M.D. CORPORATION

Current Principal Place of Business:

3802 DURANT ROAD
VALRICO, FL 33594

New Principal Place of Business:

Current Mailing Address:

3802 DURANT ROAD
VALRICO, FL 33594

New Mailing Address:

FEI Number: 59-3546097 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EDMUNDSON, MIKE
2856 DUNCAN TREE CIRCLE
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

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: MIKE EDMUNDSON

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: VP ( ) Delete
Name: EDMUNDSON, JANNIE
Address: 2856 DUNCAN TREE CIRCLE
City-St-Zip: VALRICO, FL 33594

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P ( ) Change (X) Addition
Name: EDMUNDSON, MIKE
Address: 2856 DUNCAN TREE CIRCLE
City-St-Zip: VALRICO, FL 33594

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: MIKE EDMUNDSON P 10/10/2007

Electronic Signature of Signing Officer or Director — Date