

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000011710

FILED
Dec 10, 2004
Secretary of State

Entity Name: EMPLOYER RESOURCES INTERNATIONAL, INC.

Current Principal Place of Business:

37 N. ORANGE AVE.
STE. 500
ORLANDO, FL 32801

New Principal Place of Business:

37 N. ORANGE AVENUE
SUITE 1010
ORLANDO, FL 32801

Current Mailing Address:

37 N. ORANGE AVE.
STE. 500
ORLANDO, FL 32801

New Mailing Address:

37 N. ORANGE AVENUE
SUITE 1010
ORLANDO, FL 32801

FEI Number: 59-3558281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIDHENDI, KHOSROW
129 WHITECAPS CIRCLE
MMAITLAND, FL 32751 US

Name and Address of New Registered Agent:

BIDHENDI, KHOSROW
129 WHITECAPS CIRCLE
MAITLAND, FL 32751 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: KHOSROW BIDHENDI

12/10/2004

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: PS () Delete
Name: BIDHENDI, KHOSROW
Address: 129 WHITECAPS CIR
City-St-Zip: MAITLAND, FL 32751

Title: CFO () Delete
Name: BIDHENDI, KHOSROW
Address: 129 WHITECAPS CIR
City-St-Zip: MAITLAND, FL 32751

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 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: KHOSROW BIDHENDI

PS

12/10/2004

Electronic Signature of Signing Officer or Director

Date