

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000024061

FILED
Feb 16, 2005
Secretary of State

Entity Name: WALKER ENTERPRISES OF NORTH AMERICA, INC.

Current Principal Place of Business:

2825 SOUTH WASHINGTON AVE. SUITE 151
TITUSVILLE, FL 32780

New Principal Place of Business:

Current Mailing Address:

2825 SOUTH WASHINGTON AVE. SUITE 151
TITUSVILLE, FL 32780

New Mailing Address:

FEI Number: 59-3582116

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WALKER, V
3120 LAS PALMAS DR.
TITUSVILLE, FL 32780 US

Name and Address of New Registered Agent:

WALKER, VIOLETA
3120 LAS PALMAS DR.
SUITE 151
TITUSVILLE, FL 32780 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: VIOLETA WALKER

02/16/2005

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: D () Delete
Name: WALKER, V
Address: 2825 SOUTH WASHINGTON AVE. SUITE 151
City-St-Zip: TITUSVILLE, FL 32780

Title: D () Delete
Name: WALKER, K
Address: 2825 SOUTH WASHINGTON AVE. SUITE 151
City-St-Zip: TITUSVILLE, FL 32780

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: VIOLETA WALKER

OWNE

02/16/2005

Electronic Signature of Signing Officer or Director

Date