

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000087647

Entity Name: BUSINESSPROFITS.COM, INC.

FILED
Mar 10, 2008
Secretary of State

Current Principal Place of Business:

11828 SW 79 TERR.
MIAMI, FL 33183

New Principal Place of Business:

8895 SW 84TH CIRCLE
OCALA, FL 34484

Current Mailing Address:

11828 SW 79 TERR.
MIAMI, FL 33183

New Mailing Address:

8895 SW 84TH CIRCLE
OCALA, FL 34484

FEI Number: 65-0954275

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROSA, OLGA S
11828 SW 79 TERR.
MIAMI, FL 33183 US

Name and Address of New Registered Agent:

CROSA, OLGA S
8895 SW 84TH CIRCLE
OCALA, FL 34481 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: OLGA S CROSA

03/10/2008

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: PST () Delete
Name: CROSA, OLGA S
Address: 11828 SW 79 TERR.
City-St-Zip: MIAMI, FL 33183

Title: VPD () Delete
Name: CROSA, MICHAEL L
Address: 11828 SW 79 TERR.
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: CROSA, OLGA S
Address: 8895 SW 84TH CIRCLE
City-St-Zip: OCALA, FL 34481

Title: VPD (X) Change () Addition
Name: CROSA, MICHAEL L
Address: 8895 SW 84TH CIRCLE
City-St-Zip: OCALA, FL 34481

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: MICHAEL L CROSA

VPD

03/10/2008

Electronic Signature of Signing Officer or Director

Date