

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000053951

**FILED**  
**Nov 09, 2009**  
**Secretary of State**

**Entity Name:** THE ORIGINAL MAD MODS, INC.

**Current Principal Place of Business:**

9769 S ORANGE BLOSSOM TRAIL  
35  
ORLANDO, FL 32837

**New Principal Place of Business:**

1306 S DIXIE HWY W  
POMPANO BEACH, FL 33060

**Current Mailing Address:**

9769 S ORANGE BLOSSOM TRAIL  
35  
ORLANDO, FL 32837

**New Mailing Address:**

1306 S DIXIE HWY W  
POMPANO BEACH, FL 33060

**FEI Number:** 20-0927202

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BAUMAN, ROBERT E PSTD  
9769 S ORANGE BLOSSOM TRAIL  
35  
ORLANDO, FL 32837 US

**Name and Address of New Registered Agent:**

BAUMAN, ROBERT E PSTD  
1306 S DIXIE HWY W  
POMPANO BEACH, FL 33060 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: ROBERT E. BAUMAN

11/09/2009

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: PSTD ( ) Delete  
Name: BAUMAN, ROBERT E PSTD  
Address: 9769 S ORANGE BLOSSOM TRAIL SUITE 35  
City-St-Zip: ORLANDO, FL 32837

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition  
Name: BAUMAN, ROBERT E PSTD  
Address: 1306 S DIXIE HWY W  
City-St-Zip: POMPANO BEACH, FL 33060

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: ROBERT E. BAUMAN

PSTD

11/09/2009

Electronic Signature of Signing Officer or Director

Date