## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P01000056731

Entity Name: MIDWEST INTERLOCKING PAVERS, INC.

FILED Sep 19, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4135 BURLINGTON AVE N 4135 BURLINGTON AVENUE NORTH ST PETERSBURG, FL 33713

ST PETERSBURG, FL 33713

**Current Mailing Address: New Mailing Address:** 

2950 CENTRAL AVE 34192 OAK HAMMOCK DRIVE ST PETERSBURG, FL 33712 RIDGE MANOR, FL 33523

FEI Number: 59-3541163 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

CRAIG, RANDY CRAIG, RANDY 34192 ÓAK HAMMOCK DRIVE 6041 5TH AVE N ST PETERSBURG, FL 33710 RIDGE MANOR, FL 33523 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: RANDY CRAIG 09/19/2005

> 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:** 

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

CRAIG, RANDY CRAIG, RANDY Name: Name: 6041 5TH AVE N 34192 OAK HAMMOCK DRIVE Address: Address:

City-St-Zip: ST PETERSBURG, FL 33710 City-St-Zip: RIDGE MANOR, FL 33523

Title: VΡ Title: VΡ (X) Change ( ) Addition () Delete Name: CRAIG. SHERLYNN

Name: CRAIG, SHERLYNN

6041 5TH AVE N 34192 OAK HAMMOCK DRIVE Address: Address: ST.PETERSBURG, FL 33710 RIDGE MANOR, FL 33523 City-St-Zip: 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.

VΡ SIGNATURE: SHERLYNN CRAIG 09/19/2005