2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Jan 31, 2008
Secretary of State

DOCUMENT# P03000137950

Entity Name: GAIL & ERIC'S CLEANING SERVICE, INC.

Current Principal Place of Business:

4395 ELDRON AVENUE
NORTH PORT, FL 34286

New Principal Place of Business:

8263 OSBERT AVE.
NORTH PORT, FL 34287 US

Current Mailing Address:

P O BOX 37608
SARASOTA, FL 34278

New Mailing Address:

P O BOX 7601
NORTH PORT, FL 34287 US

FEI Number: 59-3755354 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

M. GAIL, JOHSON
4395 ELDRON AVENUE
NORTH PORT, FL 34286 US

Name and Address of New Registered Agent:

JOHNSON, M. GAIL
8263 OSBERT AVE.
NORTH PORT, FL 34287 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: M. GAIL JOHNSON 01/31/2008
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: PT ( ) Delete
Name: JOHNSON, M. GAIL
Address: P O BOX 37608
City-St-Zip: SARASOTA, FL 34278

Title: VS (X) Delete
Name: JOHNSON, ERIC R
Address: P O BOX 37608
City-St-Zip: SARASOTA, FL 34278

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition
Name: JOHNSON, M. GAIL
Address: P O BOX 7601
City-St-Zip: NORTH PORT, FL 34287 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: M. GAIL JOHNSON PT 01/31/2008
Electronic Signature of Signing Officer or Director Date