## 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000076314

Entity Name: GOLDEN TOUCH PAINTING SERVICES, CORP.

FILED May 21, 2008 Secretary of State

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

5900 S TAMIAMI TRAIL 615 SE 15TH TER

SUITE G CAPE CORAL, FL 33990 SARASOTA, FL 34231

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

615 SE 15TH TERRACE P.O. BOX 7386

CAPE CORAL, FL 33990 FORT MYERS, FL 33911

FEI Number: 20-2901050 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TAX HOUSE CORPORATION LUIS, ANTHONY P 1261 E SAMPLE RD 615 SE 15TH TER

POMPANO BEACH, FL 33064 US CAPE CORAL, FL 33990 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: LUIS ANTHONY 05/21/2008

> 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: (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete DE OLIVEIRA, VALTAIR A ANTHONY, LUIZ Name: Name:

615 SE 15TH TER Address: P.O BOX 7386 Address: City-St-Zip: CAPE CORAL, FL 33990 City-St-Zip: FORT MYERS, FL 33911

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

Name: OLIVEIRA, NEUZELI F Name: SILVA, ROBENSON 615 SE 15TH TER Address: P.O. BOX 7386 Address:

CAPE CORAL, FL 33990 FORT MYERS, FL 33911 City-St-Zip: 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.

Ρ SIGNATURE: LUIS ANTHONY 05/21/2008