

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000103243

**FILED**  
**Oct 31, 2006**  
**Secretary of State**

**Entity Name:** S & S PAINTING SERVICE INC.

**Current Principal Place of Business:**

1080 99 ST.  
21B  
BAY HARBOR ISLANDS, FL 33154

**New Principal Place of Business:**

941 S PARK ROAD  
211  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

1080 99 ST.  
21B  
BAY HARBOR ISLANDS, FL 33154

**New Mailing Address:**

941 S PARK ROAD  
211  
HOLLYWOOD, FL 33021

**FEI Number:** 74-3149052

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHABI, SHMUEL  
1080 99 ST.  
21B  
BAY HARBOR ISLANDS, FL 33154 US

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

SHABI, SHMUEL  
941 S PARK ROAD  
211  
HOLLYWOOD, FL 33021 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: SHMUEL SHABI

10/31/2006

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: P ( ) Delete  
Name: SHABI, SHMUEL  
Address: 1080 99 ST. APT. B-21  
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

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

Title: P (X) Change ( ) Addition  
Name: SHABI, SHMUEL  
Address: 941 S PARK ROAD #211  
City-St-Zip: HOLLYWOOD, FL 33021

I hereby certify that the information supplied with this filing does not qualify for the 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: SHMUEL SHABI

P

10/31/2006

Electronic Signature of Signing Officer or Director

Date