

**2009 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED**  
**Jul 21, 2009**  
**Secretary of State**

DOCUMENT# P07000056352

**Entity Name:** M.J.M. CONTRACTORS, INC.

**Current Principal Place of Business:**

220 GARDEN CIRCLE N  
DUNEDIN, FL 34698

**New Principal Place of Business:**

873 WEST BAY DR.  
214  
LARGO, FL 33770

**Current Mailing Address:**

220 GARDEN CIRCLE N  
DUNEDIN, FL 34698

**New Mailing Address:**

873 WEST BAY DR.  
214  
LARGO, FL 33770

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

MICHAUD, MICHAEL  
220 GARDEN CIRCLE N  
DUNEDIN, FL 34698 US

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

RICE, TIM  
873 WEST BAY DR.  
214  
LARGO, FL 33770 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: TIM RICE

07/21/2009

\_\_\_\_\_  
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: D ( ) Delete  
Name: MICHAUD, MICHAEL  
Address: 220 GARDEN CIRCLE N  
City-St-Zip: DUNEDIN, FL 34698

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: D (X) Change ( ) Addition  
Name: RICE, TIM  
Address: 873 WEST BAY DR  
City-St-Zip: LARGO, FL 33770

Title: PST ( ) Change (X) Addition  
Name: RICE, TIM  
Address: 873 WEST BAY DR. #214  
City-St-Zip: LARGO, FL 33770

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: TIM RICE

PRES

07/21/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date