

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# S48807

FILED
Oct 12, 2004
Secretary of State

Entity Name: PREMIER SUPPLY COMPANY OF TAMPA BAY, INC.

Current Principal Place of Business:

8408 SUN STATES
TAMPA, FL 33614 US

New Principal Place of Business:

5444 PIONEER PARK BLVD.
C
TAMPA, FL 33634 US

Current Mailing Address:

8408 SUN STATES
TAMPA, FL 33614 US

New Mailing Address:

5444 PIONEER PARK BLVD.
C
TAMPA, FL 33634 US

FEI Number: 59-3063012

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONTE, DAVID ALLEN
19711 WYNDMILL CIRCLE
ODESSA, FL 33556 US

Name and Address of New Registered Agent:

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:

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: CONTE, DAVID ALLEN,
Address: 19711 WYNDMILL CIRCLE
City-St-Zip: ODESSA, FL

Title: D () Delete
Name: MASSARO, RICHARD ANT, ON
Address: 9508 WEST FLORA STREET
City-St-Zip: TAMPA, FL 33615

Title: D () Delete
Name: VAN HERSHBERGER, PET, ER
Address: 3501 61ST ST. NORTH
City-St-Zip: ST. PETERSBURG, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: DAVID A. CONTE

PRES

10/12/2004

Electronic Signature of Signing Officer or Director

Date