

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F08000005048

FILED
Oct 16, 2009
Secretary of State

Entity Name: CONSTRUCTION RETAIL SERVICES, INC.

Current Principal Place of Business:

38555 MORAVIAN DR.
CLINTON TWP., MI 48036

New Principal Place of Business:

Current Mailing Address:

38555 MORAVIAN DR.
CLINTON TWP., MI 48036

New Mailing Address:

FEI Number: 86-1156519

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OAKWOOD, GREGORY
1345 RED COLT CT.
ASTOR, FL 32102 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: GREGORY OAKWOOD

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: OAKWOOD, GREGORY
Address: 1345 RED COLT CT.
City-St-Zip: ASTOR, FL 32102

Title: V () Delete
Name: OZMENT, TIMOTHY
Address: 21610 HIGHVIEW
City-St-Zip: CLINTON TWP., MI 48036

Title: S () Delete
Name: PIOTROWSKI, JOYCE
Address: 38555 MORAVIAN DR.
City-St-Zip: CLINTON TWP., MI 48036

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V (X) Change () Addition
Name: MOORE, ROBERT
Address: 21834 SUNSET DRIVE
City-St-Zip: ASTOR, FL 32102

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: ROBERT MOORE

V

10/16/2009

Electronic Signature of Signing Officer or Director

Date