2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F49216

Entity Name: RAINBOW PLUMBING, INC.

FILED Apr 25, 2006 Secretary of State

Current Principal Place of Business: New P	incipal Place of Business:
--	----------------------------

3400 BOCA CIEGA DR. NORTH ST PETERSBURG, FL 33710

Current Mailing Address: New Mailing Address:

3400 BOCA CIEGA DR. NORTH P.O.BOX41335

ST PETERSBURG, FL 33710 ST PETERSBURG, FL 33743

FEI Number: 59-2132407 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:

SCULLY, CHARLES R 3835 CENTRAL AVENUE ST PETERSBURG, FL 33713 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: CHARLES R SCULLY

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name:SMITH, FRANCISName:SMITH, FRANCISAddress:3400 BOCA CIEGA DRIVE NORTHAddress:POBOX41335

City-St-Zip: ST PETERSBURG, FL 33710 City-St-Zip: ST PETERSBURG, FL 33743

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

Name: SMITH, LARRY
Address: 6701 DARTMOUTH AVENUE NORTH
Name: SMITH, LARRY
Address: POBOPX41335

City-St-Zip: ST PETERSBURG, FL 33710 City-St-Zip: ST PETERSBURG, FL 33743

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

Name: SMITH, PATTY Name: SMITH, PATTY
Address: 3400 BOCA CIEGA DRIVE NORTH Address: POBOX41335

City-St-Zip: ST PETERSBURG, FL 33710 City-St-Zip: ST PETERSBURG, FL 33743

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: FRANCIS SMITH P 04/25/2006