

2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED

2006 NOV 16 PM 12:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F53615		
1. Entity Name NATIONAL INSPECTION AND CONSULTANTS, INC.		

Principal Place of Business 3949 EVANS AVENUE SUITE 407 FORT MYERS, FL 33901 US	Mailing Address 3949 EVANS AVENUE SUITE 407 FORT MYERS, FL 33901 US
--	--

2. Principal Place of Business 9911 Bavaria Rd.	3. Mailing Address 9911 Bavaria Rd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Fort Myers FL	City & State Fort Myers FL
Zip 33913-8510	Zip 33913-8510
Country	Country



11012006 REIN-P CR2E098 (11/05)

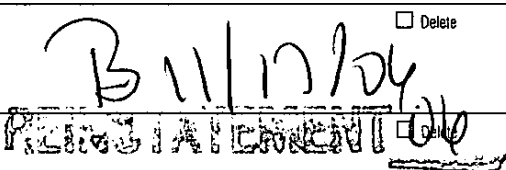
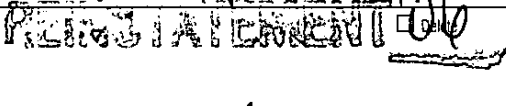
4. FEI Number 59-2134161	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent VIGNE, ROBERT A 3949 EVANS AVE #407 FT. MYERS, FL 33901	7. Name and Address of New Registered Agent Name Robert A. Vigne Street Address (P.O. Box Number is Not Acceptable) 9911 Bavaria Rd. City Fort Myers FL Zip Code 33913
--	--

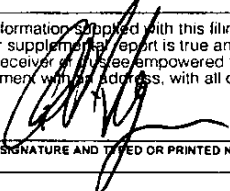
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After January 1, 2007, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
--	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VIGNE, ROBERT A 3949 EVANS AVE SUITE 407 FT MYERS, FL 33901 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	9911 Bavaria Rd. Fort Myers FL 33913-8510 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SHIELDS, JOHN C 3949 EVANS AVE SUITE 407 FT MYERS, FL 33901 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	9911 Bavaria Rd. Fort Myers FL 33913-8510 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VIGNE, DAVID J 3949 EVANS AVE SUITE 407 FORT MYERS, FL 33901 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	9911 Bavaria Rd. Fort Myers FL 33913-8510 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VIGNE, RICHARD U 3949 EVANS AVE SUITE 407 FORT MYERS, FL 33901 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	9911 Bavaria Rd. Fort Myers FL 33913-8510 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	100081503351 11/03/06--01041--009 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  Robert A. Vigne 11/13/06 239-939-4313
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #