2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# K70741

Entity Name: R.E.W. SERVICES, INC.

FILED Oct 01, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2420 FORSYTH RD 2914 FORSYTH RD ORLANDO, FL 32807 US ORLANDO, FL 32807 US

Current Mailing Address: New Mailing Address:

2914 FORSYTH RD 2420 FORSYTH RD ORLANDO, FL 32807 US ORLANDO, FL 32807 US

FEI Number: 59-3467000 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KING, STAN KING, STAN 2420 FORSYTH RD 2914 FORSYTH RD ORLANDO, FL 32807 US ORLANDO, FL 32807 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: STAN KING 10/01/2009

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

KING, STAN KING, STAN Name: Name: 20737 QUINLAN ST 18724 SHELDON ST Address: Address: City-St-Zip: ORLANDO, FL 32833 City-St-Zip: ORLANDO, FL 32833

Title: VΡ Title: () Change () Addition () Delete

Name: GUTHRIE. KEN Name: 813 SNOW QUEEN DR Address: Address: CHULUOTA, FL 32766 City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change () Addition

BERNIER, GERALD Name: Name: 1932 VIKING AVE Address: Address: City-St-Zip: DELTONA, FL 32725 City-St-Zip:

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.

Ρ SIGNATURE: STAN KING 10/01/2009