

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000006138

FILED
Oct 27, 2004
Secretary of State**Entity Name:** TAMPA BUSINESS BUILDERS, INC.**Current Principal Place of Business:**6510 NORTH ARMENIA AVENUE
TAMPA, FL 33604**New Principal Place of Business:****Current Mailing Address:**6510 NORTH ARMENIA AVENUE
TAMPA, FL 33604**New Mailing Address:****FEI Number:** 56-2293429 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**Name and Address of Current Registered Agent:****Name and Address of New Registered Agent:**BURNS, BRIAN O DR
6510 NORTH ARMENIA AVENUE
TAMPA, FL 33604 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: PISCITEUI, DONNA M
Address: 1900 LAND 'O LAKES BLVD., STE #106
City-St-Zip: LUTZ, FL 33549**Title:** V () Delete
Name: BURNS, BRIAN O DR
Address: 6510 NORTH ARMENIA AVENUE
City-St-Zip: TAMPA, FL 33604**Title:** S () Delete
Name: MURRAY, SHEENA
Address: 15702 NORTH DALE MABRY HWY
City-St-Zip: TAMPA, FL 33618**Title:** T () Delete
Name: WALTERS, WILLIAM H III
Address: 4890 W. KENNEDY BLVD.
City-St-Zip: TAMPA, FL 33609**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:**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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM H. WALTERS III

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10/27/2004

Electronic Signature of Signing Officer or Director

Date