

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000044678

FILED  
Nov 08, 2007  
Secretary of State

Entity Name: ROCIO'S ROOFING & REPAIRS, INC.

## Current Principal Place of Business:

11560 WILES RD.  
STE. 2  
CORAL SPRINGS, FL 33071

## New Principal Place of Business:

4450 NW 126TH AVE.  
STE. 108  
CORAL SPRINGS, FL 33065

## Current Mailing Address:

11560 WILES RD.  
STE. 2  
CORAL SPRINGS, FL 33071

## New Mailing Address:

4450 NW 126TH AVE.  
STE. 108  
CORAL SPRINGS, FL 33065

FEI Number: 65-1100814

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MAGHAN, ROCIO  
11241 NW 34 PL  
CORAL SPRINGS, FL 33065 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: ROCIO MAGHAN

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: PTD ( ) Delete  
Name: MAGHAN, ROCIO  
Address: 11241 NW 34TH PLACE  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VSD ( ) Delete  
Name: PHILIPSBORN, JOHN  
Address: 5356 NW 5TH AVE  
City-St-Zip: FORT LAUDERDALE, FL 33309

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: MAGHAN, ROCIO  
Address: 1124 NW 34TH PLACE  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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.

SIGNATURE: PHILIPSBORN JOHN

VSD

11/08/2007

Electronic Signature of Signing Officer or Director

Date