2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000104867

FILED Nov 11, 2009 Secretary of State

Entity Name: AQUAPRO PAINTING & WATERPROOFING, INC.

Current Principal Place of Business:		New Principal Place of Business:		
305 NE 4 30CA RA	ITH AVE TON, FL 3343	2		
urrent N	lailing Addre	ss:	New Mailing Addres	ss:
SUITE #5	E CREST AVE			
	LE, KY 40222 :: 65-1148810	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
		,,	., ,	, ,
lame and	d Address of (Current Registered Agent:	Name and Address	of New Registered Agent:
305 NE 4				
OCA RA	TON, FL 3343	2 US		
he above the Stat	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
he above the Stat	e named entity e of Florida RE: KEVIN S	submits this statement for the SMITHER		
The above in the Stat SIGNATU	e named entity e of Florida. RE: <u>KEVIN S</u> Electro	submits this statement for the SMITHER nic Signature of Registered Ag		ed office or registered agent, or both, Date
the above the Stat	e named entity e of Florida. RE: <u>KEVIN S</u> Electro	submits this statement for the SMITHER		
The above the Stat SIGNATU	e named entity e of Florida. RE: <u>KEVIN S</u> Electro	submits this statement for the SMITHER nic Signature of Registered Ag g Trust Fund Contribution ().	ent	
The above the Stat SIGNATU	e named entity e of Florida. RE: KEVIN S Electron mpaign Financin S AND DIREC	submits this statement for the SMITHER nic Signature of Registered Agg Trust Fund Contribution (). TORS:) Delete //IN S	ent	Date
The above in the State SIGNATU SIGNATU SIEction Ca DFFICER itle: lame: ddress:	e named entity e of Florida. RE: KEVIN S Electrol mpaign Financin S AND DIREC DP (SMITHER, KEV 1305 NE 4TH BOCA RATON,	submits this statement for the SMITHER nic Signature of Registered Ag g Trust Fund Contribution (). TORS:) Delete //N S AVE FL 33429) Delete RT A EST AVE	ent ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTOR

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: ROBERT A. CRIPE CFO 11/11/2009