

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000105697

**FILED**  
**Jan 19, 2005**  
**Secretary of State**

**Entity Name:** KURT RUBY COPPERWORKS, INC.

**Current Principal Place of Business:**

12708 NW 15TH ST  
SUNRISE, FL 33323

**New Principal Place of Business:**

3037 BEACH BLVD. SOUTH  
GULFPORT, FL 33707 US

**Current Mailing Address:**

12708 NW 15TH ST  
SUNRISE, FL 33323

**New Mailing Address:**

3037 BEACH BLVD. SOUTH  
GULFPORT, FL 33707 US

**FEI Number:** 65-1148643

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

RUBY, KURT  
12708 NW 15TH ST  
FORT LAUDERDALE, FL 33323 US

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

RUBY, KURT  
3037 BEACH BLVD. SOUTH  
GULFPORT, FL 33707 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: KURT RUBY

01/19/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: RUBY, KURT  
Address: 12708 NW 15TH ST  
City-St-Zip: SUNRISE, FL 33323

Title: STD (X) Delete  
Name: RUBY, KURT JR.  
Address: 12708 NW 15TH ST  
City-St-Zip: FORT LAUDERDALE, FL 33323

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition  
Name: RUBY, KURT  
Address: 12708 NW 15TH ST  
City-St-Zip: SUNRISE, FL 33323

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KURT RUBY

PSTD

01/19/2005

Electronic Signature of Signing Officer or Director

Date