## 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000080887

Entity Name: COMPANIONY'S TILE INSTALLATION, CORP.

FILED Aug 30, 2005 Secretary of State

**Current Principal Place of Business:** New Principal Place of Business:

135 ACAPULCO DRIVE 5848 DIEGO ST KISSIMMEE, FL 34743

APT A

ORLANDO, FL 32807 US

**Current Mailing Address: New Mailing Address:** 

135 ACAPULCO DRIVE 5848 DIEGO ST

KISSIMMEE, FL 34743 APT A

ORLANDO, FL 32807

FEI Number: 32-0024549 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

COMPANIONY, LUIS E COMPANIONY, LUIS E 5848 DIEGO ST 135 ACAPULCÓ DRIVE

KISSIMMEE, FL 34743 US APT A 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: LUIS E. COMPANIONY 08/30/2005

> 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 COMPANIONY, LUIS P COMPANIONY, LUIS P Name: Name: 135 ACAPULCO DRIVE 5848 DIEGO ST. APT A Address: Address: City-St-Zip: KISSIMMEE, FL 34743 City-St-Zip: ORLANDO, FL 32807

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

Name: COMPANIONY, MARIA E Name: 135 ACAPULCO DRIVE Address: Address: KISSIMMEE, FL 34743 City-St-Zip: 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.

Ρ SIGNATURE: LUIS E. COMPANIONY 08/30/2005