2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000123496

Entity Name: J.T.P. HOUSE & GARDEN MAINTENANCE INC.

FILED Mar 30, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
9940 BROAD CHANNEL RD MIAMI, FL 33157				124 FAYE STREET GAINESVILLE, FL 32640		
Current Mailing Address:				New Mailing Address:		
9940 BROAD CHANNEL RD MIAMI, FL 33157				124 FAYE STREET GAINESVILLE, FL 32640		
FEI Number:	59-5631691	FEI Number Applied For ()	FEI Num	nber Not Appli	cable () Cer	rtificate of Status Desired (X)
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
POUTANEN, JORMA T 9940 BROAD CHANNEL RD MIAMI, FL 33157 US				POUTANEN, JORMA T 124 FAYE STREET GAINESVILLE, FL 32640 US		
	named entity s of Florida.	ubmits this statement for the pu	rpose of	f changing it	s registered office	or registered agent, or both,
SIGNATURE: J.T. POUTANEN						03/30/2005
	Electroni	c Signature of Registered Agen	t			Date
Election Can		(2)(b), F.S., the corporation did not r Trust Fund Contribution (). ************************************	eceive th	•		OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	POUTANEN, JO 9940 BROAD CH	HANNEL RD		Title: Name: Address: City-St-Zip:	P (X) Cha POUTANEN, JORMA 124 FAYE STREET GAINESVILLE, FL 3	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	P () Cha POUTANEN, JORMA 124 FAYE STREET GAINESVILLE, FL 3	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	P () Cha POUTANEN, JORMA 124 FAYE STREET GAINESVILLE, FL 3	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	P () Cha POUTANEN, JORMA 124 FAYE STREET GAINESVILLE, FL 3	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	P () Cha POUTANEN, JORMA 124 FAYE STREET GAINESVILLE, FL 3	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	P () Cha POUTANEN, JORMA 124 FAYE STREET GAINESVILLE, FL 3	

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: JT POUTANEN P 03/30/2005