

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000020210

Entity Name: R & S RESTORATION, INC.

FILED  
Oct 01, 2005  
Secretary of State

## Current Principal Place of Business:

6319 SIXTH ST. W.  
BRADENTON, FL 34207

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 2001  
ONECO, FL 34264

## New Mailing Address:

FEI Number: 06-1679127

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: LAURA SANTIAGO

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SANTIAGO, RAUL  
Address: PO BOX 913  
City-St-Zip: ONECO, FL 34264

Title: VD ( ) Delete  
Name: AQUINO, SAMUEL  
Address: 6319 SIXTH ST. W.  
City-St-Zip: BRADENTON, FL 34207

Title: STD ( ) Delete  
Name: SANTIAGO, LAURA  
Address: PO BOX 913  
City-St-Zip: ONECO, FL 34264

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SANTIAGO, RAUL  
Address: PO BOX 1368  
City-St-Zip: TALLEVAST, FL 34270

Title: VD (X) Change ( ) Addition  
Name: AQUINO, SAMUEL  
Address: PO BOX 1368  
City-St-Zip: TALLEVAST, FL 34270

Title: STD (X) Change ( ) Addition  
Name: SANTIAGO, LAURA  
Address: PO BOX 1368  
City-St-Zip: TALLEVAST, FL 34270

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: LAURA SANTIAGOL

STD

10/01/2005

Electronic Signature of Signing Officer or Director

Date