## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000115538

Entity Name: LATRESE & KEVIN ENTERPRISES INC.

FILED Oct 25, 2006 Secretary of State

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

8987 SHINDLER CROSSING DR. 3450 DUNN AVE STE 101 JACKSONVILLE, FL 32222 JACKSONVILLE, FL 32218

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

8987 SHINDLER CROSSING DR. 11453 JERRY ADAM DR JACKSONVILLE, FL 32222 JACKSONVILLE, FL 32218

FEI Number: 35-2217034 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HARGRAVE, LATRESE W HARGRAVE, LATRESE W 8987 SHINDLER CROSSING DR. 11453 JERRY ADAM DR JACKSONVILLE, FL 32218 US JACKSONVILLE, FL 32222

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: LATRESE W HARGRAVE 10/25/2006

> 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 (X) Change ( ) Addition HARGRAVE, LATRESE W HARGRAVE, LATRESE W Name: Name: 8987 SHINDLER CROSSING DR Address: 11453 JERRY ADAM DR Address: City-St-Zip: JACKSONVILLE, FL 32222 City-St-Zip: JACKSONVILLE, FL 32218

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

HARGRAVE, KEVIN SR HARGRAVE, KEVIN SR Name: Name: 8987 SHINDLER CROSSING DR Address: 11453 JERRY ADAM DR Address: JACKSONVILLE, FL 32222 JACKSONVILLE, FL 32218 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 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: LATRESE W HARGRAVE **PRES** 10/25/2006