## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000121538

City-St-Zip:

JACKSONVILLE, FL 32224

Entity Name: TERRANCE ROBERTS LAYING THE INC.

FILED Nov 08, 2005 Secretary of State

Littly Nan	IIC. IERRAN	OL ROBERTS LATING TILE, III	NO.		
Current Pr	incipal Place	of Business:	New Principal Place	New Principal Place of Business:	
8916 RICAI JACKSON	RDO LANE VILLE, FL 322	16			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
8916 RICAI JACKSON	RDO LANE VILLE, FL 322	16			
FEI Number:	20-0018267	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
8916 RICA	, TERRANCE RDO LANE VILLE, FL 322	16 US			
The above in the State		submits this statement for the p	urpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	E: TERRAN	CEROBERTS			
	Electron	ic Signature of Registered Age	nt	Date	
		3(2)(b), F.S., the corporation did not	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () ROBERTS, TER 8916 RICARDO JACKSONVILLE	LANE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	LLERA, RAUL	Delete NT RD., APT. 306 E, FL 32225	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	PENEZ, CARLO	Delete S BLVD, APT. 806	Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: TERRANCE ROBERTS P 11/08/2005