

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000128192

1. Entity Name  
KIKE'S PAINTING, INC



FILED

05 MAR -2 AM 8:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

3601 BAKER AVENUE  
#71  
HAINES CITY, FL 33844

Mailing Address

3601 BAKER AVENUE  
#71  
HAINES CITY, FL 33844

2. Principal Place of Business

3601 Baker Ave  
Suite, Apt. #, etc.  
# 87

3. Mailing Address

P.O. Box 1539  
Suite, Apt. #, etc.

City & State

Haines City

City & State

DAVENPORT

Zip

33844

Country

FL

Zip

33846

Country

FL

01312005

REIN-P

CR2E098 (6/04)

4. FEI Number

90-0120651

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GUIA, TZIRATZENYT-Y  
3601 BAKER AVENUE  
#71  
HAINES CITY, FL 33844

7. Name and Address of New Registered Agent

Name HERNANDEZ, TZIRATZENYT-Y  
Street Address (P.O. Box Number is Not Acceptable)  
3601 BAKER AVE # 87  
City HAINES CITY FL 33844

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

700048433257

03/15/05--01050--009 \*\*150.00

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
P	GUIA, TZIRATZENYT Y	3601 BAKER AVE. APT 71	HAINES CITY, FL 33844	<input type="checkbox"/>
VP	HERNANDEZ, JESUS E	3601 BAKER AVE., APT. 71	HAINES CITY, FL 33844	<input type="checkbox"/>
SEC	GUIA, TZIRATZENYT Y	3601 BAKER AVE., APT 71	HAINES CITY, FL 33844	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
P	HERNANDEZ, TZIRATZENIT Y	3601 BAKER AVE # 87	HAINES CITY FL. 33844	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	HERNANDEZ, JESUS E	3601 BAKER AVE. #87	HAINES CITY, FL. 33844	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	SEC. HERNANDEZ, TZIRATZENIT Y	3601 BAKER AVE. #87	HAINES CITY, FL. 33844	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Tziratzenyt Y Hernandez  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

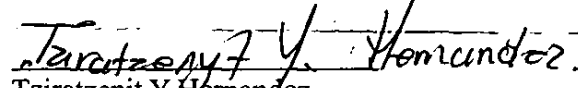
State Department  
PO Box 6327  
Tallahassee, FL. 32314

January 31, 2005

By this means I am requesting the waiver of the penalty because the corporation was done by November 2003 and I did not received a renewal notice during the year 2004, and for that reason I did not do the renewal as it was supposed to be done.

Also I would like to have a copy of the changes made in order to open a new Bank account.

Thanks for your attention to this matter.

  
Tziratzenit Y Hernandez  
President