## 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000133837  1. Enlity Name INTERIOR & EXTERIOR QUALITY WORK, INC.				FILED  05 JAN 11 AM 11: 35	
Principal Place 256 BAY ST APOPKA, FL		Mailing Address 256 BAY ST APOPKA, FL 32712		SECRETARY OF STATE  JALLAHASSEE, FEDMOA	
2. Principal P	lace of Business	3. Mailing Address	····		
Suite, Apt. #, etc. 256 Bay 17 Suite, Apt. #, etc.		Suite, Apt. #, etc.	Bayst	12222004 REIN-P CR2E098 (6/04)	
City & State Stypopks		City & State	. 1 ~/	4. FEI Number £5 - 1210138	
<sup>Zip</sup> 32		Zip 32712	Country 4SA	5. Certificate of Status Desired S8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RADYVONYUK, DANIEL 256 BAY ST APOPKA, FL 32712			Name	7. Name and Address of New Registered Agent	
			Street Address	Street Address (P.O. Box Number is Not Acceptable)	
			City	FL Zip Code	
	named entity submits this statement for	the purpose of changing its r	egistered office or regis	tered agent, or both, in the State of Florida. I am familiar with, and accept	
وسير	ions di registereo agent	0		12.14.04	
SIGNATURE	Signature, typed or printed name of registeres agent a	nd title if applicable. (NOTE:	Registered Agent signature rec	quired when reinstating) DATE	
	E NOW!!! FEE IS \$150.00 inary 1, 2005, Fee will be \$300.0	0		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10.	OFFICERS AND I		11,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
NAME STREET ADDRESS	P RADYVONYUK, DANIEL 256 BAY ST	☐ Delete	TITLE NAME STREET ADDRESS	Change Addition	
CITY-ST-ZIP	APOPKA, FL 32712		CITY-ST-ZIP	400045451134 01/26/05-=01039019_**150.00	
NAME STREET ADDRESS CITY-ST-ZIP	AN CONTRACTORIA	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ede liet e	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Oddition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS	4000454511534	
TITLE NAME STREET ADDRESS		☐ Delete	CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	Change ☐ Addition	
indicated	on this report or supplemental report is poration or the receiver or trustee each or on an attachment with the trustees, w	true and accurate and that m	y signature shall have th is required by Chapter 6	Section 119.07(3)(i), Florida Statutes. I further certify that the information is same legal effect as if made under cath; that I am an officer or director itor, Florida Statutes; and that my name appears in Block 10 or Block 11 if	

P0300133837

## Im Daniel Radyvonyuk, owner of company; Interior & Exterior Quality Works, Inc.

Im sorry but my computer wont let me pull the form that you have reccomended \_\_\_\_ for me out.

I want to give you the explanation for my late payment to the corporation. During the year

i didnt receive a paper to pay, and now i receive your notice, that i have to pay and i dont know

exactly how much i have to pay but i will send the amount: \$180.00 and if that is not enough

send me a letter, and i will send more. My apologies to you about this inconvenience.

Daniel Radyvonyuk

12.14.04