## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000142369

Name:

Address:

City-St-Zip:

Entity Name: S & G PROFESSIONAL PAINTING INC

FILED Feb 01, 2005 Secretary of State

Entity Name: 5 & G PROFESSIONAL PAINTING INC.						
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
	RBROOK DRI 9, FL 32792	VE US	3840 JANIE ORLANDO	E COURT ), FL 32822	US	
Current Mailing Address:			New Maili	New Mailing Address:		
	RBROOK DRI 9, FL 32792	VE US	3840 JANII ORLANDO	E COURT ), FL 32822	US	
FEI Number:	38-3714363	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Surrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
6279 WHIS	SANTIAGO L BPERING WAY D, FL 32807	( US				
The above in the State		submits this statement for the p	ourpose of changing i	ts registered o	office or registered agent, or both,	
SIGNATUR	RE: SOLANO	SANTIAGO L.				
	Electron	ic Signature of Registered Ag	ent		Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notic	e.		
				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () SOLANO, SANT 6279 WHISPER ORLANDO, FL	RING WAY	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () SOLANO, FELI 6277 WHISPER ORLANDO, FL	RING WAY	Title: Name: Address: City-St-Zip:	VP (X VELAZQUEZ, X 3840 JANIE CO ORLANDO, FL	DURT	
Title: Name: Address: City-St-Zip:	ETC ( ) GONZALEZ, RO 3063 RIVERBR WINTER PARK	OOK DR.	Title: Name: Address: City-St-Zip:	S/T (X VELAZQUEZ, I 3840 JANIE CO ORLANDO, FL	DURT	
Title:	( )	Delete	Title:	С (	) Change (X) 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.

Name:

Address:

City-St-Zip:

SOLANO, CARMEN M

6279 WHISPERING WAY

ORLANDO, FL 32807 US

SIGNATURE: SOLANO SANTIAGO L. P 02/01/2005