

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000145041

FILED  
Aug 12, 2005  
Secretary of State

Entity Name: CHAROL ARAZO DRYWALL INC

## Current Principal Place of Business:

12220 N 16TH ST  
#337  
TAMPA, FL 33612 US

## Current Mailing Address:

12220 N 16TH ST  
#337  
TAMPA, FL 33612 US

## New Principal Place of Business:

1209 E 143RD AVE  
B  
TAMPA, FL 33613 US

## New Mailing Address:

1209 E 143RD AVE  
B  
TAMPA, FL 33613 US

FEI Number: 16-1686928

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARAZO, CHAROL  
12220 N 16TH ST  
#337  
TAMPA, FL 33612 US

## Name and Address of New Registered Agent:

ARAZO, CHAROL  
1209 E 143RD AVE  
B  
TAMPA, FL 33613 US

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: CHAROL ARAZO

08/12/2005

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:

Title: P ( ) Delete  
Name: ARAZO, CHAROL  
Address: 12220 N 16TH ST #337  
City-St-Zip: TAMPA, FL 33612 US

Title: V ( ) Delete  
Name: PICENA, ADULFO  
Address: 6415 HALE AVE.  
City-St-Zip: TAMPA, FL 33614

Title: ST ( ) Delete  
Name: RHODES, JOSHUA  
Address: 6415 HALE AVE.  
City-St-Zip: TAMPA, FL 33614

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ARAZO, CHAROL  
Address: 1209 E 143RD AVE APT B  
City-St-Zip: TAMPA, FL 33613 US

Title: V (X) Change ( ) Addition  
Name: PICENA, ADULFO  
Address: 6415 HALE AVE  
City-St-Zip: TAMPA, FL 33614 US

Title: ST (X) Change ( ) Addition  
Name: RHODES, JOSHUA  
Address: 6415 HALE AVE  
City-St-Zip: TAMPA, FL 33614 US

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.

SIGNATURE: CHAROL ARAZO

P

08/12/2005

Electronic Signature of Signing Officer or Director

Date