

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000006036

FILED
Nov 17, 2004
Secretary of State

Entity Name: ROSE MAINTENANCE & REPAIR INC.

Current Principal Place of Business:

302 NE 9TH TER.
CAPE CORAL, FL 33909 US

New Principal Place of Business:

1403 S GROVE AVE
FT MYERS, FL 33919 US

Current Mailing Address:

302 NE 9TH TER.
CAPE CORAL, FL 33909 US

New Mailing Address:

1403 S GROVE AVE
FT MYERS, FL 33919 US

FEI Number: 31-2029289 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLDEN, JACINDA J
1403 S GROVE AVE
FT MYERS, FL 33919 US

Name and Address of New Registered Agent:

HOLDEN, JACINDA J
10501 MCGREGOR BLVD
FT MYERS, FL 33919 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: JACINDA HOLDEN

11/17/2004

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: OSBORNE, PAMELA R
Address: 302 NE 9TH TER
City-St-Zip: CAPE CORAL, FL 33909 US

Title: T,S () Delete
Name: HOLDEN, JAMES U
Address: 302 NE 9TH TER
City-St-Zip: CAPE CORAL, FL 33909 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: OSBORNE, PAMELA R
Address: 1403 S GROVE AVE
City-St-Zip: FT MYERS, FL 33919 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PAMELA OSBORNE

P

11/17/2004

Electronic Signature of Signing Officer or Director

Date