2007 FOR PROFIT CORPORATION REINSTATEMENT

REINSTATEMENT								FILED					
DOCUMENT # P04000024505 1. Entity Name							• •						
RUBEN'S CUSTOM PAINTING, INC.								2001 DEC					
Principal Place of Business Mailing Address								SECRET TALLAH	ARY DI	-SIAIL ELORIDI			
4115 IONE CT Auburndale, FL 33823			4115 IONE CT Auburndale, Fl. 33823				TALLAH	オククピビ・	LEGINO				
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2. Principal Pla	ace of Busin	ess - No P.O. Box #	3. Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.			10052007	REIN-P	CR2E	098 (1/07)				
City & State			City & State				4. FEI Numbe 74-309				plied For at Applicable		
Zip		Country	Zip	Zip Count						\$8.75 Add Fee Required			
	6. Name	and Address of Current R	Registered Agent			7. Name and	Address of New F	legistered	Agent				
MCCLOUD, SUSAN						Name							
4115 IONE AUBURND	СТ						Street Address (P.O. Box Number is Not Acceptable)						
	•								Ti- Code				
	4				L	City FL Zip Code							
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.													
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SIGNATURE													
FILE NOWIII FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the													
FILE NOW!!! FEE IS \$150.00 After January 1, 2008, Fee will be \$300.00								corporation did	not receiv	.193(2)(b), re the prior r	r.s., the lotice.		
10.		OFFICERS AND I	DIRECTORS	1 11.			ADDITIONS/	CHANGES TO OFF	FICERS AND	DIRECTOR!	S IN 11		
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NAME		DEZ, JOSE RUBEN		NAM	_	Hen	nandez,	Jose Ru aven Dr	,ben				
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: SWAN ST McCloud Susan McCloud 12/3/07 863-307-0234													
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