2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000028073

Entity Name: SOUTH HILLS ROOFING.INC

1028 APOLLO BEACH BLVD., #21

APOLLO BEACH, FL 33572 US

Address:

City-St-Zip:

FILED Oct 09, 2009 Secretary of State

Entity Nan	ne: SOUTH HII	LLS ROOFING,INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1028 APOL #21	LO BEACH BL	/D.			
	EACH, FL 3357	72 US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	LO BEACH BL	/D.			
#21 APOLLO B	EACH, FL 3357	72 US			
FEI Number:	04-3719465	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
HORN, GAYLE J 1028 APOLLO BEACH BLVD. #21 APOLLO BEACH, FL 33572 US			13795 N NEBRASKA	CONTRACTORS REPORTING SERVICE, INC 13795 N NEBRASKA AVE TAMPA, FL 33613 US	
The above in the State		bmits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: BILL MOORE				10/09/2009	
	Electronic	Signature of Registered Age	ent	Date	
		2)(b), F.S., the corporation did no Frust Fund Contribution ().	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () D HORN, GAYLE J 1028 APOLLO BE APOLLO BEACH,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () E HORN, ELIZABET 1028 APOLLO BE APOLLO BEACH,	EACH BLVD., #21	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	S () E LOPEZ, SHANNO	elete N	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Address:

City-St-Zip:

SIGNATURE: GAYLE J HORN P 10/09/2009