2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000028481

City-St-Zip:

ARCADIA, FL 34266

FILED Oct 31, 2008 Secretary of State

Entity Nam	ne: RATHI	ERBE'S LATHING & PLASTERIN	IG, INC.				
Current Principal Place of Business:				New Principal Place of Business:			
1441 NE MA ARCADIA, I							
Current Ma	ailing Add	ress:		New Mailii	ng Address:	:	
1441 NE MANLEY RD ARCADIA, FL 34266				P.O. BOX 389 ARCADIA, FL 34265			
FEI Number:	20-0721350	FEI Number Applied For ()	FEI Nur	nber Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
AMES, CPA, CFP, ANDREW T. 128 W. OAK STREET ARCADIA, FL 34266 US				VARNER, KRISTEN 2943 S.E. CREEKWOOD TERR. ARCADIA, FL 34266 US			
The above in the State		ty submits this statement for the p	ourpose o	of changing it	s registered	office or registered agent, or both,	
SIGNATURE: KRISTEN VARNER				10/31/2008			
Electronic Signature of Registered Agent				Date			
Election Cam	paign Finan	cing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD SHAVER, TI 2230 NE HV ARCADIA, F	VY. 70, E-9		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD CASADY, JA 2230 NE HV ARCADIA, F	VY. 70, E-9		Title: Name: Address: City-St-Zip:	VP (CASADY, JAN P.O. BOX 389 ARCADIA, FL	9	
Title: Name: Address:	ST SHAVER, C. 1355 NE MA	()Delete ARRIE NLEY ROAD		Title: Name: Address:	() 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.

City-St-Zip:

SIGNATURE: JAMES E. CASADY SR. VP 10/31/2008