

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000029251

FILED
Oct 15, 2007
Secretary of State

Entity Name: BRUCE A SMITH TILE CONTRACTOR INC.

Current Principal Place of Business:

15015 MEADOWLAKE STREET
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

15015 MEADOWLAKE STREET
ODESSA, FL 33556

New Mailing Address:

FEI Number: 77-0623650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, BRUCE
15015 MEADOWLAKE STREET
ODESSA, FL 33556 US

Name and Address of New Registered Agent:

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: BRUCE A SMITH

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: SMITH, BRUCE
Address: 15015 MEADOWLAKE STREET
City-St-Zip: ODESSA, FL 33556

Title: VP () Delete
Name: ZAVATTARO, MATTIEW J
Address: 15015 MEADOWLAKE STREET
City-St-Zip: ODESSA, FL 33556

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMITH, BRUCE A
Address: 15015 MEADOWLAKE STREET
City-St-Zip: ODESSA, FL 33556

Title: VP (X) Change () Addition
Name: CUONO, LANDA
Address: 15015 MEADOWLAKE STREET
City-St-Zip: ODESSA, FL 33556

Title: SEC () Change (X) Addition
Name: DUST, RONALD A
Address: 15015 MEADOWLAKE STREET
City-St-Zip: ODESSA, FL 33556

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.

SIGNATURE: BRUCE A SMITH

Electronic Signature of Signing Officer or Director

PRES

10/15/2007

Date