## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000043687

Name:

Address:

City-St-Zip:

DORVILUS, PIERRE T

2959 NW 27 STREET

OAKLAND PARK, FL 33311

HIT Name: WIN IFY PLASTERING & DRYWALL INC

FILED Sep 27, 2007 Secretary of State

Entity Nar	ne: WINJEY	PLASTERING & DRYWALL, IN	NC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
BLDG. 12	?7 STREET PARK, FL 33	3311			
Current M	ailing Addre	ss:	New Mailing Address	New Mailing Address:	
BLDG. 12	27 STREET PARK, FL 33	3311			
FEI Number:	20-0841238	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:	
1840 SW 2 4TH FLOO MIAMI, FL The above in the State	R 33145 US named entity	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
Electronic Signature of Registered Agent			ent	Date	
		93(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( DOMINIQUE, 3 2959 NW 27 S OAKLAND PAR	TREET	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	JEAN-CHARLE	STREET BUILDING #12	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title:	ST (	) Delete	Title:	( ) 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.

Name:

Address:

City-St-Zip:

SIGNATURE: JERRY DOMINIQUE PD 09/27/2007