2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000051346

Title:

Name:

Address:

City-St-Zip:

TRES

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HANUSEL, SEBASTIAN

GULFPORT, FL 33707 US

5726 18TH AVE S

FILED Oct 19, 2006 Secretary of State

Entity Name: EXPOSITO HOME REMODELING & REPAIR, INC.				
Current Principal Place of Business:			New Principal Place of Business:	
5726 18TH . GULFPORT				
Current Mailing Address:		:	New Mailing Address:	
5726 18TH . GULFPORT				
FEI Number: 7	75-3197367	FEI Number Applied For () FEI Num	nber Not Applicable()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
O'NEILL, JA 2120 52ND CULFPORT		US		
The above r in the State		ıbmits this statement for the purpose o	f changing its registered	I office or registered agent, or both,
SIGNATUR	E: ADRIAN E	XPOSITO		
	Electronic	Signature of Registered Agent		Date
	e with s. 607.193(Signature of Registered Agent 2)(b), F.S., the corporation did not receive t	ne prior notice.	Date
Election Cam	e with s. 607.193(Signature of Registered Agent 2)(b), F.S., the corporation did not receive to the standard Contribution ().	·	Date S TO OFFICERS AND DIRECTORS:
Election Cam	e with s. 607.193(paign Financing AND DIRECT	e Signature of Registered Agent 2)(b), F.S., the corporation did not receive to standard Contribution (). ORS: Delete IAN 6	ADDITIONS/CHANGE	
Election Campofficers Title: Name: Address:	e with s. 607.193(paign Financing AND DIRECT P ()E EXPOSITO, ADR 5726 18TH AVE S GULFPORT, FL	e Signature of Registered Agent 2)(b), F.S., the corporation did not receive to the standard Contribution (). ORS: Delete HAN Section 1	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip:	S TO OFFICERS AND DIRECTORS:
Election Camp OFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address:	e with s. 607.193(paign Financing of AND DIRECT P () EXPOSITO, ADR 5726 18TH AVE S GULFPORT, FL D () EXPOSITO, ADR 5726 18TH AVE S GULFPORT, FL	e Signature of Registered Agent 2)(b), F.S., the corporation did not receive to the standard Contribution (). ORS: Delete IAN S 333707 Delete IAN S 333707 Delete IAS L VICEPRE S	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: VICE Name: EXPOSITO, I Address: 5726 18TH A	ES TO OFFICERS AND DIRECTORS: () Change () Addition () Change () Addition (X) Change () Addition MARY VICEPRE

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

Title:

Name:

Address:

City-St-Zip:

TRES

EXPOSITO, MARY

5726 18TH AVE S

GULFPORT, FL 33707 US

(X) Change () Addition

SIGNATURE: ADRIAN EXPOSITO P 10/19/2006