2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000051346

GULFPORT, FL 33707

5726 18TH AVE S

EXPOSITO, MARY

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EXPOSITO, MARY VICEPRE

GULFPORT, FL 33707 US

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GULFPORT, FL 33707 US

VICE

SEC

TRES

City-St-Zip:

Title:

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Name:

Address:

City-St-Zip:

Name: Address:

City-St-Zip:

Name:

Address: City-St-Zip:

Entity Name: EXPOSITO HOME REMODELING & REPAIR, INC.

FILED Nov 18, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
5726 18TH AVE S GULFPORT, FL 33707	12162 FORESMAN BLVD PORT CHARLOTTE, FL 33981
Current Mailing Address:	New Mailing Address:
5726 18TH AVE S GULFPORT, FL 33707	12162 FORESMAN BLVD PORT CHARLOTTE, FL 33981
FEI Number: 75-3197367 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
O'NEILL, JAMES W ESQUIRE 2120 52ND ST S CULFPORT, FL 33707 US	EXPOSITO, ADRIAN 12162 FORESMAN BLVD PORT CHARLOTTE, FL 33981 US
The above named entity submits this statement for the p in the State of Florida.	ourpose of changing its registered office or registered agent, or both,
SIGNATURE: ADRIAN EXPOSITO	11/18/2008
Electronic Signature of Registered Age	ent Date
In accordance with s. 607.193(2)(b), F.S., the corporation did no Election Campaign Financing Trust Fund Contribution ().	ot receive the prior notice.
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: P () Delete Name: EXPOSITO, MARY Address: 5726 18TH AVE S City-St-Zip: GULFPORT, FL 33707	Title: P (X) Change () Addition Name: EXPOSITO, ADRIAN Address: 12162 FORESMAN BLVD City-St-Zip: PORT CHARLOTTE, FL 33981
Title: D (X) Delete Name: EXPOSITO, ADRIAN Address: 5726 18TH AVE S	Title: () Change () Addition Name: Address:

City-St-Zip:

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Name:

Address:

City-St-Zip:

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Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

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: ADRIAN EXPOSITO PRES 11/18/2008

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