

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000062342

Entity Name: TOM WILSON EPOXY INC

FILED
Oct 29, 2007
Secretary of State

Current Principal Place of Business:

9811 SIR FREDERICK STREET
TAMPA,, FL 33637

New Principal Place of Business:

2045 GUNN HWY
ODESSA, FL 33655

Current Mailing Address:

2045 GUNN HWY.
ODESSA, FL 33655

New Mailing Address:

FEI Number: 59-3636133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIDSON, PAM
5055 SPIKE HORN DRIVE
NEW PORT RICHEY, FL 34653 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: PAM DAVIDSON

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: WILSON, TOM
Address: 9811 SIR FREDERICK STREET
City-St-Zip: TAMPA, FL 33637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILSON, TOM
Address: 2045 GUN HWY
City-St-Zip: ODESSA, FL 33655

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: PAM DAVIDSON

Electronic Signature of Signing Officer or Director

RA

10/29/2007

Date