

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000075086

FILED  
Nov 10, 2009  
Secretary of State

Entity Name: GOLD COAST CURBING & LANDSCAPE INC

## Current Principal Place of Business:

61 BALLENGER LANE  
PALM CAOST, FL 32137

## New Principal Place of Business:

## Current Mailing Address:

1515 RIDGEWOOD AVE  
A  
HOLLY HILL, FL 32117

## New Mailing Address:

61 BALLENGER LANE  
PALM COAST, FL 32137

FEI Number: 20-1099445

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LOGUIDICE, JOE  
1515 RIDGEWOOD AVENUE  
A  
HOLLY HILL, FL 32117 US

## Name and Address of New Registered Agent:

JEDI ACCOUNTING  
233 S. RIDGEWOOD  
ORMOND BEACH, FL 32174 US

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: BONNIE THOMAS

11/10/2009

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: KASTANEK, RUSS  
Address: 61 BALLENGER LANE  
City-St-Zip: PALM COAST, FL 32137

Title: VP ( ) Delete  
Name: KASTANEK, DORRIS  
Address: 61 BALLENGER LANE  
City-St-Zip: PALM COAST, FL 32137

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: KASTANEK, DORIS  
Address: 61 BALLENGER LANE  
City-St-Zip: PALM COAST, FL 32137

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: RUSSELL KASTANEK

P

11/10/2009

Electronic Signature of Signing Officer or Director

Date