2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 27, 2007
Secretary of State

DOCUMENT# P04000122090

Entity Name: SWEEPER MAN OF WEST CENTRAL FLORIDA, INC.

Current Principal Place of Business:

2519 MCMULLEN BOOTH ROAD
SUITE 510-115
CLEARWATER, FL 33761

New Principal Place of Business:

Current Mailing Address:

2519 MCMULLEN BOOTH ROAD
SUITE 510-115
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 20-1548640 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAYERS, MATTHEW E
3131 HILLSIDE LANE
SAFETY HARBOR, FL 34695 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: MATTHEW MAYERS

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: PRES ( ) Delete
Name: MAYERS, MATTHEW E
Address: 3131 HILLSIDE LANE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: V.P ( ) Delete
Name: MAYERS, AMY S
Address: 3131 HILLSIDE LANE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: SEC ( ) Delete
Name: MAYERS, AMY S
Address: 3131 HILLSIDE LANE
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ( ) Change ( ) Addition
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: AMY MAYERS VP 09/27/2007

Electronic Signature of Signing Officer or Director — Date