

# **2007 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000144198

**FILED**  
**Oct 10, 2007**  
**Secretary of State**

**Entity Name:** CANADA WAY CONTRACTING SERVICES, INC.

**Current Principal Place of Business:**

620 BAYSHORE DR.  
SUITE 2  
FORT LAUDERDALE, FL 33304

**New Principal Place of Business:**

900 CRYSTAL LAKE DR.  
SUITE 1-D  
POMPANO BEACH, FL 33064

**Current Mailing Address:**

620 BAYSHORE DR.  
SUITE 2  
FORT LAUDERDALE, FL 33304

**New Mailing Address:**

900 CRYSTAL LAKE DR.  
SUITE 1-D  
POMPANO BEACH, FL 33064

**FEI Number:** 20-1767828

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TAX HOUSE CORPORATION  
1261 E. SAMPLE ROAD  
POMPANO BEACH, FL 33064 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: ELIZABETH SUPPI

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: PSD ( ) Delete  
Name: DE ASSIS LANA, NILSON  
Address: 620 BAYSHORE DR SUITE 2  
City-St-Zip: FORT LAUDERDALE, FL 33304

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSD (X) Change ( ) Addition  
Name: LANA, NILSON A  
Address: 900 CRYSTAL LAKE DR. - SUITE 1-D  
City-St-Zip: POMPANO BEACH, FL 33064

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: NILSON A LANA

PSD

10/10/2007

Electronic Signature of Signing Officer or Director

Date