2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000155052

Entity Name: D & Z QUALITY PAINTING INC.

FILED Sep 27, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5822 ESPANOLA AVENUE 232 VENETIA AVE

NORTH PORT, FL 34287 US APT #2

NORTH PORT, FL 34287 US

Current Mailing Address: New Mailing Address:

5822 ESPANOLA AVENUE 232 VENETIA AVE

NORTH PORT, FL 34287 US APT #2
NORTH PORT, FL 34287 US

FEI Number: 20-1878529 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:

DULO, YEVGENIY ZIMIN, PAVEL 5822 ESPANOLA AVENUE 232 VENETIA AVE

NORTH PORT, FL 34287 US APT #2
NORTH PORT, FL 34287 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: PAVEL ZIMIN 09/27/2005

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P () Delete Title: D,P (X) Change () Addition

Name: DULO, YEVGENIY Name: ZIMIN, PAVEL

 Address:
 5822 ESPANOLA AVENUE
 Address:
 232 VENETIA AVE APT 2

 City-St-Zip:
 NORTH PORT, FL 34287 US
 City-St-Zip:
 NORTH PORT, FL 34287 US

Title: DVP (X) Delete Title: () Change () Addition

 Name:
 ZIMIN, PAVEL
 Name:

 Address:
 4257 PINCUSHION STREET
 Address:

 City-St-Zip:
 NORTH PORT, FL 34286 US
 City-St-Zip:

Title: T (X) Delete Title: () Change () Addition

 Name:
 DUBOVOY, DMITRIY
 Name:

 Address:
 8703 TRIONFO AVENUE
 Address:

 City-St-Zip:
 NORTH PORT, FL 34287 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAVEL ZIMIN DP 09/27/2005