

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000164554

FILED
Dec 16, 2009
Secretary of State

Entity Name: WWW.SARASOTACLEANING.COM, INC.

Current Principal Place of Business:

4252 PRAIRIE VIEW DR.
SARASOTA, FL 34232 US

New Principal Place of Business:

4252 PRAIRIE VIEW DR SOUTH
SARASOTA, FL 34232 US

Current Mailing Address:

4252 PRAIRIE VIEW DR
SARASOTA, FL 34232 US

New Mailing Address:

4252 PRAIRIE VIEW DR SOUTH
SARASOTA, FL 34232 US

FEI Number: 20-1973362

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEUSTADT, GERALD
8420 ISLES WORTH CT
SARASOTA, FL 34243 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: GERALD NEUSTADT

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: DA SILVA, JOSCELITO G
Address: 4252 PRAIRIE VIEW DR.
City-St-Zip: SARASOTA, FL 34232 US

Title: VP () Delete
Name: GOMES, NATIVIDADE L
Address: 4252 PRAIRIE VIEW DR.
City-St-Zip: SARASOTA, FL 34232 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DA SILVA, JOSCELITO G
Address: 4252 PRAIRIE VIEW DR SOUTH
City-St-Zip: SARASOTA, FL 34232 US

Title: VP (X) Change () Addition
Name: GOMES, NATIVIDADE L
Address: 4252 PRAIRIE VIEW DR SOUTH
City-St-Zip: SARASOTA, FL 34232 US

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: NATIVIDADE L GOMES

VP

12/16/2009

Electronic Signature of Signing Officer or Director

Date