

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000172471

FILED
Nov 09, 2005
Secretary of State

Entity Name: SUNSHINE HANDYMAN SERVICES, INC.

Current Principal Place of Business:

4340 NW 5TH PLACE
FORT LAUDERDALE, FL 33317

New Principal Place of Business:

Current Mailing Address:

4340 NW 5TH PLACE
FORT LAUDERDALE, FL 33317

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOFTMAN, SEYMOUR
4340 NW 5TH PLACE
FORT LAUDERDALE, FL 33317 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: SEYMOUR LOFTMAN

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: D () Delete
Name: LOFTMAN, SEYMOUR
Address: 4340 NW 5TH PLACE
City-St-Zip: FORT LAUDERDALE, FL 33317

Title: D () Delete
Name: LOFTMAN, SEYMOUR
Address: 4340 NW 5TH PLACE
City-St-Zip: FORT LAUDERDALE, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOFTMAN, SEYMOUR
Address: 4340 NW 5TH PLACE
City-St-Zip: FORT LAUDERDALE, FL 33317

Title: VP (X) Change () Addition
Name: LOFTMAN, SEYMOUR
Address: 4340 NW 5TH PLACE
City-St-Zip: FORT LAUDERDALE, FL 33317

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: SEYMOUR LOFTMAN

Electronic Signature of Signing Officer or Director

P

11/09/2005

Date