2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000043946

Entity Name: TORRES & BROTHERS PAINTING, INC.

FILED Apr 22, 2008 Secretary of State

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

1257 SW SAN ESTEBAN AVE 2500 NW 79 AVENUE PORT ST LUCIE, FL 34953 127

DORAL, FL 33122

Current Mailing Address: New Mailing Address:

1257 SW SAN ESTEBAN AVE 2500 NW 79 AVENUE PORT ST LUCIE, FL 34953 127

DORAL, FL 33122

FEI Number: 20-2792205 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:

TORRES, MARIA G S

1257 SW SAN ESTEBAN AVE
PORT ST LUCIE, FL 34953 US

127
DORAL, FL 33122 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: WILLIAM TORRES 04/22/2008

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: PSTD () Delete Title: P (X) Change () Addition

Name:TORRES, MIGUELName:TORRES, WILLIAMAddress:1257 SW SAN ESTEBAN AVEAddress:2500 NW 79 AVENUE, SUITE 127

City-St-Zip: PORT ST LUCIE, FL 34953 City-St-Zip: MIAMI, FL 33122

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

 Name:
 TORRES, MARIA G S
 Name:

 Address:
 1257 SW SAN ESTEBAN AVE
 Address:

 City-St-Zip:
 PORT ST LUCIE, FL 34953
 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: WILLIAM TORRES P 04/22/2008