

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000054723

FILED
Dec 02, 2008
Secretary of State

Entity Name: CONCRETE DESIGNS BY LESA, INC.

Current Principal Place of Business:

5740 ANSLEY WAY
MT DORA, FL 32757

New Principal Place of Business:

12617 MILWAUKEE AVE
TAVARES, FL 32778

Current Mailing Address:

5740 ANSLEY WAY
MT DORA, FL 32757

New Mailing Address:

12617 MILWAUKEE AVE
TAVARES, FL 32778

FEI Number: 65-1246542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KALESKI, LESA
5740 ANSLEY WAY
MT DORA, FL 32757 US

Name and Address of New Registered Agent:

KALESKI, LESA
12617 MILWAUKEE AVE
TAVARES, FL 32778 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: LESA KALESKI

12/02/2008

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:

Title: PD () Delete
Name: KALESKI, LESA
Address: 5740 ANSLEY WAY
City-St-Zip: MT DORA, FL 32757

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KALESKI, LESA
Address: 12617 MILWAUKEE AVE
City-St-Zip: TAVARES, FL 32778

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: LESA KALESKI

PD

12/02/2008

Electronic Signature of Signing Officer or Director

Date