## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P05000120611

City-St-Zip:

LAKELAND, FL 33803 US

Entity Name: BRIANNA CONSTRUCTION INC

FILED Apr 17, 2007 Secretary of State

Littly Nai	IIIE. DRIAININ	A CONSTRUCTION INC			
Current P	rincipal Plac	e of Business:	New Principal Place o	New Principal Place of Business:	
1603 FAYE LAKELANI	E STREET D, FL 33803	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
1603 FAYE LAKELANI	E STREET D, FL 33803	US			
FEI Number:	: 20-3406025	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
1603 FAYE	S, ANTONIO E STREET D, FL 33803	US			
The above in the State	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE: ANTONI	O CHARLES			
	Electro	nic Signature of Registered Age	ent	Date	
		93(2)(b), F.S., the corporation did nongerous funding Trust Fund Contribution().	ot receive the prior notice.		
OFFICERS	S AND DIREC	CTORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VP ( CHARLES, AN 1603 FAYE S <sup>-</sup> LAKELAND, F	reet	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PD ( CHARLES, AR 1603 FAYE S <sup>-</sup> LAKELAND, F	FREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	TD ( CHARLES, JU 1603 FAYE S		Title: Name: Address:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: ANTONIO CHARLES P 04/17/2007