

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000122621

FILED
Apr 15, 2008
Secretary of State

Entity Name: GULFCOAST SCREEN ENCLOSURES, INC.

Current Principal Place of Business:

4760 ENTERPRISE AVE
SUITE 406
NAPLES, FL 34104 US

New Principal Place of Business:

8197 XENIA LANE
NAPLES, FL 34114 US

Current Mailing Address:

4760 ENTERPRISE AVE
SUITE 406
NAPLES, FL 34104 US

New Mailing Address:

8197 XENIA LANE
NAPLES, FL 34114 US

FEI Number: 20-3407764

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PAGE, FRANCOIS
7670 NOVARA CT.
NAPLES, FL 34114 US

Name and Address of New Registered Agent:

PAGE, FRANCOIS
8197 XENIA LANE
NAPLES, FL 34114 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: FRANCOIS PAGE

04/15/2008

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: PT () Delete
Name: PAGE, FRANCOIS
Address: 7670 NOVARA COURT
City-St-Zip: NAPLES, FL 34111 US

Title: VS () Delete
Name: PAGE, SHANNON
Address: 7670 NOVARA COURT
City-St-Zip: NAPLES, FL 34111 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: PAGE, FRANCOIS
Address: 8197 XENIA LANE
City-St-Zip: NAPLES, FL 34114 US

Title: VS (X) Change () Addition
Name: PAGE, SHANNON
Address: 8197 XENIA LANE
City-St-Zip: NAPLES, FL 34114 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: SHANNON PAGE

VP

04/15/2008

Electronic Signature of Signing Officer or Director

Date