## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P05000142798

Address:

City-St-Zip:

250 CLARA

BATON ROGUE, LA 70808

FILED Oct 09, 2007 Secretary of State

Entity Nar	ne: METALPI	RO INDUSTRIES, INC.				
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:		
1006 ARTHUR [ LYNN HAV	ORIVE 'EN, FL 32444	1				
Current M	ailing Addres	s:	New Mailing Address:	New Mailing Address:		
P.O. BOX 2 PANAMA (	20202 CITY BEACH, I	FL 32417				
FEI Number:	20-3648057	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )		
Name and	Address of C	urrent Registered Agent:	Name and Address of I	Name and Address of New Registered Agent:		
BAYSOLUTIONS 2101 NORTHSIDE DRIVE SUITE 303 PANAMA CITY, FL 32405 US			1006 ARTHUR DRIVE	JENEVEIN, PETER MR 1006 ARTHUR DRIVE LYNN HAVEN, FL 32444 US		
	named entity s of Florida.	submits this statement for th	e purpose of changing its registered o	office or registered agent, or both,		
SIGNATURE: PETER JENEVEIN				10/09/2007		
	Electron	ic Signature of Registered /	Agent	Date		
		3(2)(b), F.S., the corporation dic Trust Fund Contribution ( ).	I not receive the prior notice.			
	S AND DIREC	• • • • • • • • • • • • • • • • • • • •	ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () DIAZ, GLENN E 2200 JACKSON CHALMET, LA	I BLVD	Title: ( Name: Address: City-St-Zip:	) Change()Addition		
Title: Name: Address: City-St-Zip:	JENEVEIN, PE		Title: ( Name: Address: City-St-Zip:	) Change ()Addition		
Title: Name:	VP ( ) DIAZ, DVM, RE	Delete CHELLE L	Title: ( Name:	) Change ( ) Addition		

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.

Address:

City-St-Zip:

SIGNATURE: PETER JENEVEIN VΡ 10/09/2007