## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P05000155850

FILED Mar 20, 2008 Secretary of State

Entity Name: JANITORIAL AND LABORERS ENTERPRISES INTERNATIONAL, INC.

**Current Principal Place of Business: New Principal Place of Business:** 305 NE 2ND DRIVE 117 E. AMELIA ST. ORLANDO, FL 32801 HOMESTEAD, FL 33030 **Current Mailing Address: New Mailing Address:** 305 NE 2ND DRIVE PO BOX 74076 HOMESTEAD, FL 33030 LOS ANGELES, CA 90004 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PAULIN, MAUDE LEADER, PHILIP 305 NE 2ND DRIVE 117 E. AMELIA ST. HOMESTEAD, FL 33030 ORLANDO, FL 32801 US 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: PHILIP LEADER 03/20/2008 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: () Delete Title: (X) Change ( ) Addition PIERRE, WISBERG BROOKS, QUINCY Name: Name: 934 DAVIS PARKWAY 9834 SEPULVEDA BLVD # 111 Address: Address: City-St-Zip: FLORIDA CITY, FL 33034 City-St-Zip: LOS ANGELES, CA 91343 (X) Delete Title: Title: () Change () Addition Name: NELSON, JEAN CLAUDE Name: 305 NE 2ND DRIVE Address: Address: HOMESTEAD, FL 33030 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition JEAN-LOUIS, RITHO Name: Name: 38124 SW 195TH PLACE Address: Address: City-St-Zip: FLORIDA CITY, FL 33034 City-St-Zip: Title: (X) Delete Title: () Change () Addition PAULIN, MAUDE Name: Name: Address: 305 NE 2ND DRIVE Address: City-St-Zip: City-St-Zip: HOMESTEAD, FL 33030 Title: (X) Delete Title: () Change () Addition PAULIN, ERICA Name: Name: 19705 SW 87TH PLACE Address: Address: City-St-Zip: MIAMI, FL 33157 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: QUINCY BROOKS P 03/20/2008