2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Mar 20, 2008
Secretary of State

DOCUMENT# P05000155850

Entity Name: JANITORIAL AND LABORERS ENTERPRISES INTERNATIONAL, INC.

Current Principal Place of Business:

305 NE 2ND DRIVE
HOMESTEAD, FL 33030

New Principal Place of Business:

117 E. AMELIA ST.
ORLANDO, FL 32801

Current Mailing Address:

305 NE 2ND DRIVE
HOMESTEAD, FL 33030

New Mailing Address:

PO BOX 74076
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:

PAULIN, MAUDE
305 NE 2ND DRIVE
HOMESTEAD, FL 33030 US

Name and Address of New Registered Agent:

LEADER, PHILIP
117 E. AMELIA ST.
ORLANDO, FL 32801 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:

Title: D ( ) Delete
Name: PIERRE, WISBERG
Address: 934 DAVIS PARKWAY
City-St-Zip: FLORIDA CITY, FL 33034

Title: D (X) Delete
Name: NELSON, JEAN CLAUDE
Address: 305 NE 2ND DRIVE
City-St-Zip: HOMESTEAD, FL 33030

Title: D (X) Delete
Name: JEAN-LOUIS, RITHO
Address: 38124 SW 195TH PLACE
City-St-Zip: FLORIDA CITY, FL 33034

Title: D (X) Delete
Name: PAULIN, MAUDE
Address: 305 NE 2ND DRIVE
City-St-Zip: HOMESTEAD, FL 33030

Title: D (X) Delete
Name: PAULIN, ERICA
Address: 19705 SW 87TH PLACE
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: BROOKS, QUINCY
Address: 9834 SEPULVEDA BLVD # 111
City-St-Zip: LOS ANGELES, CA 91343

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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
Electronic Signature of Signing Officer or Director Date