2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000004021

Address:

City-St-Zip:

206 LAKE MEADOWS

ROCKWALL, TX 75087

FILED Oct 03, 2007 Secretary of State

Entity Nai	me: FIRST Q	UALITY RESTORATION CAR	RPET CARE	E, INC.		
Current Principal Place of Business:				New Principal Place of Business:		
744 E BURGESS RD STE B-101 PENSACOLA, FL 32504				8963 PENSACOLA BLVD PENSACOLA, FL 32534		
Current Mailing Address:				New Mailing Address:		
744 E BURGESS RD STE B-101 PENSACOLA, FL 32504				8963 PENSACOLA BLVD PENSACOLA, FL 32534		
FEI Number:	: 04-3839645	FEI Number Applied For ()	FEI Num	ber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
LOPEZ, DANIEL 9567 COBBLEBROOK DR PENSACOLA, FL 32506 US				HELM, JAMES G JR 8963 PENSACOLA BLVD PENSACOLA, FL 32534 US		
	named entity e of Florida.	submits this statement for the	purpose of	changing its registere	d office or registered agent, or both,	
SIGNATURE: JAMES G HELM JR				10/03/2007		
	Electro	nic Signature of Registered A	gent		Date	
		3(2)(b), F.S., the corporation did g Trust Fund Contribution ().	not receive th	ne prior notice.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D (X LOPEZ, DANIE 9567 COBBEB PENSACOLA,	ROOK DR		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (HELM, JAMES 3542 SECURIT GARLAND, TX	Y ST STE A		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D (X MANN, CYNTH	i) Delete IA		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: JAMES G. HELM JR **PRES** 10/03/2007