## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P06000024959

3609 3RD STREET SW

LEHIGH ACRES, FL 33971 US

Address: City-St-Zip:

Entity Name: THIES & BARBOSA SERVICES INC

FILED Oct 22, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2731 COL0	ONIAL BLVD				
	ERS, FL 33907	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
2731 COL0	ONIAL BLVD				
FORT MYE	ERS, FL 33907	US			
FEI Number:	: 42-1698669	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
METRO BUSINESS SOLUTIONS INC 5245 RAMSEY WAY			4460 CLEVELAND AV	METRO BUSINESS AGENCY INC 4460 CLEVELAND AVE	
4 FORT MYERS, FL 33907 US			E FORT MYERS, FL 33	FORT MYERS, FL 33901 US	
	named entity see of Florida.	ubmits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: METRO BUSINESS AGENCY INC				10/22/2009	
	Electroni	ic Signature of Registered Age	ent	Date	
		(2)(b), F.S., the corporation did no Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () BARBOSA, FRA 2731 COLONIAL FORT MYERS, I	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () DE SOUZA, JUE 3609 3RD STRE LEHIGH ACRES	ET SW	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D () DOS SANTOS, E	Delete EUDES	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: FRANCISCO BARBOSA P 10/22/2009