

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000041510

FILED
Mar 29, 2008
Secretary of State

Entity Name: AMERICA SERVICE PAINTING INC.

Current Principal Place of Business:

6209 W COMMERCIAL BLVD
SUITE 7
TAMARAC, FL 33319 US

New Principal Place of Business:

6122 NW 1ST STREET
MARGATE, FL 33063 US

Current Mailing Address:

6209 W COMMERCIAL BLVD
SUITE 7
TAMARAC, FL 33319 US

New Mailing Address:

6122 NW 1ST STREET
MARGATE, FL 33063 US

FEI Number: 20-4557680

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ, SABRINA
6209 W COMMERCIAL BLVD
SUITE 7
TAMARAC, FL 33319 US

Name and Address of New Registered Agent:

MONIZ DA SILVA, ABEL J
6122 NW 1ST STREET
MARGATE, FL 33063 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: ABEL MONIZ DASILVA

03/29/2008

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: PSTD () Delete
Name: GOMEZ, SABRINA
Address: 6209 W COMMERCIAL BLVD SUITE 7
City-St-Zip: TAMARAC, FL 33319 US

Title: VP (X) Delete
Name: MONIZ DA SILVA, ABEL J
Address: 6209 W COMMERCIAL BLVD SUITE 7
City-St-Zip: TAMARAC, FL 33319 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: MONIZ DA SILVA, ABEL J
Address: 6122 NW 1ST STREET
City-St-Zip: MARGATE, FL 33063 US

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: ABEL MONIZ DASILVA

PSTD

03/29/2008

Electronic Signature of Signing Officer or Director

Date