2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000054881

Title:

Name:

Address:

City-St-Zip:

Entity Name: SOUTHEAST PAINTING OF TAMPA BAY OF INC

FILED Dec 26, 2007 Secretary of State

analy name: Gooth Exchinating of Talling States.			
Current Principal Place of Business:		New Principal Place of Business:	
P.O.BOX 16013 ST.PETERSBURG, FL 33733 US		3530 1ST AVENUE NOI SUITE 113 ST.PETERSBURG, FL	
Current Mailing Address:		New Mailing Address:	
P.O.BOX 16013 ST.PETERSBURG, FL 33733 US			
FEI Number: 20-4766572 FEI Number	r Applied For() FEI Num	ber Not Applicable ()	Certificate of Status Desired (X)
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
THOMAS, LANNIS 6760 62ND WAY SO ST.PETERSBURG, FL 33712 US		THOMAS, LANNIS P 6760 62ND WAY SO ST.PETERSBURG, FL	33712 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: LANNIS THOMAS			12/26/2007
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	S TO OFFICERS AND DIRECTORS:
Title: P () Delete Name: THOMAS, LANNIS Address: 6760 22ND WAY SO City-St-Zip: ST.PETERSBURG, FL 33712		Title: (Name: Address: City-St-Zip:) Change () Addition
Title: VP () Delete Name: THOMAS, CHAD L Address: P.O.BOX 16013 City-St-Zip: ST.PETERSBURG, FL 33733		Name: THOMAS, CHA Address: P.O.BOX 160	
Title: SEC () Delete Name: THOMAS, GWENDOLYN Address: 6760 22ND WAY SO City-St-Zip: ST.PETERSBURG, FL 33712		Title: (Name: Address: City-St-Zip:) 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ERNEST MCMULLEN VP 12/26/2007

() Delete

() Change (X) Addition

MCMULLEN, ERNEST VP

ST.PETERSBURG, FL 33733 US

P.O.BOX 12783