2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000066038

City-St-Zip:

TAMPA, FL 33610

FILED Oct 08, 2007 Secretary of State

DOCON	ILIVI#IO	000000000		Secretary or State	
Entity Na	me: PERRO	SO'S CONSTRUCTION CORP			
Current Principal Place of Business:			New Principal Place o	of Business:	
6623 S 32	TH AV				
TAMPA, F	L 33619				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
6623 S 32 TAMPA, F					
FEI Number	: 20-4859378	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
OSORIO,			OSORIO, JOSE O		
1419 W WATERS AVE			1419 W WATERS AVE		
104 TAMPA, FL 33634 US			104 TAMPA, FL 33604 US	TAMPA, FL 33604 US	
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE: JOSE OSORIO				10/08/2007	
	Electro	onic Signature of Registered Ag	ent	Date	
		93(2)(b), F.S., the corporation did nong Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	Р () Delete	Title:	() Change () Addition	
Name:	BRAVO, FRAI	VCISCO	Name:		
Address:	6623 S 32TH	AVE	Address:		
City-St-Zip:	TAMPA, FL 3	3619	City-St-Zip:		
Title:	VP () Delete	Title:	() Change () Addition	
Name:	BRAVO, FRAI	NCISCO JR	Name:		
Address:	3620 N WHIT	TIER AV	Address:		
City-St-Zip:	TAMPA, FL 3	3619	City-St-Zip:		
Title:	,) Delete		() Change () Addition	
Name:	NARANJO, JO		Name:		
Address:	2009 E WILD	ER AV	Address:		

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.

City-St-Zip:

SIGNATURE: FRANCISCO BRAVO P 10/08/2007