

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000076173

FILED
Oct 08, 2009
Secretary of State

Entity Name: SUCCI LABROZZI AND THOMPSON INTL, INC.

Current Principal Place of Business:

109 LAKE DAVENPORT BLVD
DAVENPORT, FL 33880

New Principal Place of Business:

Current Mailing Address:

109 LAKE DAVENPORT BLVD
DAVENPORT, FL 33880

New Mailing Address:

FEI Number: 20-4996840

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LABROZZI, JOE
216 WESTWIND DR
DAVENPORT, FL 33896 US

Name and Address of New Registered Agent:

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: JOE LABROZZI

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: P () Delete
Name: LABROZZI, JOE
Address: 216 WESTWIND DR
City-St-Zip: DAVENPORT, FL 33896

Title: T () Delete
Name: THOMPSON, JOHN H
Address: 11311 BRONSON RD
City-St-Zip: CLERMONT, FL 34711

Title: V () Delete
Name: SUCCI, MICHELINE
Address: 109 LAKE DAVENPORT BLVD
City-St-Zip: DAVENPORT, FL 33880

Title: S () Delete
Name: THOMPSON, GEORGINA M
Address: 11311 BRONSON RD
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOE LABROZZI

P

10/08/2009

Electronic Signature of Signing Officer or Director

Date