2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000142710

City-St-Zip:

TAMPA, FL 33614 US

FILED Dec 08, 2008 Secretary of State

Entity Nar	me: JO*AN*1	ΓO, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2521 W. D TAMPA, FI	IANA STREE L 33614 U	T S			
Current M	lailing Addre	ss:	New Mailing Address	New Mailing Address:	
2521 W. D TAMPA, FI	IANA STREE L 33614 U	T IS			
FEI Number:	: 59-3333411	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:	
CONTRACTORS REPORTING SERVICE, INC 2001 W BUSCH BLVD STE A TAMPA, FL 33612 US			13795 N. NEBRASKA	CONTRACTORS REPORTING SERVICE, INC 13795 N. NEBRASKA AVE. TAMPA, FL 33613 US	
	named entity of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE: STEPHA	ANIE HIDAY		12/08/2008	
	Electro	nic Signature of Registered Ag	gent	Date	
		93(2)(b), F.S., the corporation did r ng Trust Fund Contribution ().	not receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (BORZILLO, AI 2521 W. DIAN TAMPA, FL 33	A STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T (BORZILLO, JO 2521 W. DIAN TAMPA, FL 33	A STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	V (BORZILLO, AN 2521 W. DIAN		Title: Name: Address:	() 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.

City-St-Zip:

SIGNATURE: ANTHONY BORZILLO PRES 12/08/2008