## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P07000018713

Address:

City-St-Zip:

6480 20TH STREET

VERO BEACH, FL 32966

Entity Name: SJH AND ASSOCIATES INC

FILED Feb 12, 2009 Secretary of State

Entity Nan	ne: SJH AND A	ASSOCIATES INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
6480 20TH STREET VERO BEACH, FL 32966			6480 20TH STREET SUITE #104 VERO BEACH, FL 33		
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
6480 20TH STREET VERO BEACH, FL 32966			6480 20TH STREET SUITE #104 VERO BEACH, FL 32		
FEI Number:	65-1301435	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
GONZALEZ, L ANDREA 6480 20TH STREET VERO BEACH, FL 32966 US			6480 20TH ŚTREET SUITE #104		
The above in the State		ibmits this statement for the pu	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: L. ANDREA GONZALEZ				02/12/2009	
	Electronic	Signature of Registered Age	nt	Date	
		2)(b), F.S., the corporation did not Trust Fund Contribution (  ).	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () E GONZALEZ, MAN 6480 20TH STRE VERO BEACH, F	ET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () E GONZALEZ, BRIA 6480 20TH STRE VERO BEACH, F	ET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VP () [ GONZALEZ, AND	Pelete REA	Title: Name:	( ) 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.

Address:

City-St-Zip:

SIGNATURE: BRIAN GONZALEZ S 02/12/2009