

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000034610

FILED  
Dec 01, 2008  
Secretary of State

Entity Name: B.L.S. CONSTRUCTION SERVICES INC

**Current Principal Place of Business:**

1612 LINARES WAY  
JACKSONVILLE, FL 32221

**New Principal Place of Business:**

**Current Mailing Address:**

1612 LINARES WAY  
JACKSONVILLE, FL 32221

**New Mailing Address:**

FEI Number: 20-8666494

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SMITH, MICHAEL B  
1612 LINARES WAY  
JACKSONVILLE, FL 32221 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: MICHAEL SMITH

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: SMITH, MICHAEL B  
Address: 1612 LINARES WAY  
City-St-Zip: JACKSONVILLE, FL 32221

Title: VP ( ) Delete  
Name: LAYMAN, JOSHUA R  
Address: 1612 LINARES WAY  
City-St-Zip: JACKSONVILLE, FL 32221

Title: D ( ) Delete  
Name: BOGOLIN, GARY  
Address: 81 BRUCE  
City-St-Zip: PALMCOAST, FL 32157

**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:

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: MICHAEL SMITH

P

12/01/2008

Electronic Signature of Signing Officer or Director

Date