## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P07000044915

WASSERMAN, GREGG

SEMINOLE, FL 33776 US

12517 PARK BLVD

Name:

Address: City-St-Zip: FILED Nov 17, 2009 Secretary of State

Entity Name: R & K MECHANICAL INC. **Current Principal Place of Business: New Principal Place of Business:** 12517 PARK BLVD 3350 ULMERTON RD SEMINOLE, FL 33776 US SUITE #9 CLEARWATER, FL 33762 US **Current Mailing Address: New Mailing Address:** 12517 PARK BLVD SEMINOLE, FL 33776 US FEI Number: 20-8823046 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LILES, RONNIE E 12517 PARK BLVD US SEMINOLE, FL 33776 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: RONNIE LILES 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition LILES, RONNIE E Name: Name: 12517 PARK BLVD Address: Address: City-St-Zip: SEMINOLE, FL 33776 US City-St-Zip: Title: VΡ Title: () Delete (X) Change ( ) Addition Name: FLEXON, KATARZYNA Name: LILES, KATARZYNA 12517 PARK BLVD 12517 PARK BLVD Address: Address: SEMINOLE, FL 33776 US SEMINOLE, FL 33776 US City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: RONNIE LILES PRES 11/17/2009