

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000059170

Entity Name: JOHN POLLAK HANDYMAN INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

8886 SE BAHAMA CR
HOBE SOUND, FL 33455

New Principal Place of Business:

1924 OCALA RD
JUNO BCH, FL 33408

Current Mailing Address:

8886 SE BAHAMA CR
HOBE SOUND, FL 33455

New Mailing Address:

1924 OCALA RD
JUNO BCH, FL 33408

FEI Number: 87-0802105

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POLLAK, JOHN R
8886 SE BAHAMA CR
HOBE SOUND, FL 33455 US

Name and Address of New Registered Agent:

POLLAK, JOHN R
1924 OCALA RD
JUNO BCH, FL 33408 US

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: JOHN R POLLAK

04/29/2009

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/D () Delete
Name: POLLAK, JOHN R
Address: 8886 SE BAHAMA CR
City-St-Zip: HOBE SOUND, FL 33455

Title: VP/T () Delete
Name: POLLAK, JOHN R
Address: 8886 SE BAHAMA CR
City-St-Zip: HOBE SOUND, FL 33455

Title: S () Delete
Name: POLLAK, JOHN R
Address: 8886 SE BAHAMA CR
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: POLLAK, JOHN R
Address: 1924 OCALA RD
City-St-Zip: JUNO BCH, FL 33408

Title: VP/T (X) Change () Addition
Name: POLLAK, JOHN R
Address: 1924 OCALA RD
City-St-Zip: JUNO BCH, FL 33408

Title: S (X) Change () Addition
Name: POLLAK, JOHN R
Address: 1924 OCALA RD
City-St-Zip: JUNO BCH, FL 33408

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: JOHN R POLLAK

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date