2011 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Feb 28, 2011
Secretary of State

DOCUMENT# P07000067753

Entity Name: A.S.P. SPECIALTIES, INC

Current Principal Place of Business:

4800 SOUTH WESTSHORE BLVD
323
TAMPA, FL 33611 US

New Principal Place of Business:

6401 S WESTSHORE BLVD
123
TAMPA, FL 33616 US

Current Mailing Address:

4800 SOUTH WESTSHORE BLVD
323
TAMPA, FL 33611 US

New Mailing Address:

6401 S WESTSHORE BLVD
123
TAMPA, FL 33616 US

FEI Number: 26-0321442 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAMIREZ, RUDY M
6301 SOUTH WESTSHORE BLVD
1414
TAMPA, FL 33616 US

Name and Address of New Registered Agent:

RAMIREZ, RUDY M
6401SOUTH WESTSHORE BLVD
123
TAMPA, FL 33616 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: RUDY M RAMIREZ 02/28/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: RAMIREZ, RUDY M
Address: 6401 SOUTH WESTSHORE BLVD APT 123
City-St-Zip: TAMPA, FL 33616 US

Title: VP
Name: RAMIREZ, RODOLFO M
Address: 6401 SOUTH WESTSHORE BLVD ATP 123
City-St-Zip: TAMPA, FL 33616 US

Title: DIR
Name: RAMIREZ, RUDY M
Address: 6401 SOUTH WESTSHORE BLVD APT 123
City-St-Zip: TAMPA, FL 33616 US

Title: DIR
Name: RAMIREZ, RODOLFO M
Address: 6401 SOUTH WESTSHORE BLVD APT 123
City-St-Zip: TAMPA, FL 33616 US

I hereby 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 all other like empowered.

SIGNATURE: RUDY M RAMIREZ P 02/28/2011
Electronic Signature of Signing Officer or Director Date