

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000080970

FILED
Nov 06, 2008
Secretary of State

Entity Name: PROFESSIONAL DRYWALL SERVICES OF JACKSONVILLE, INC.

Current Principal Place of Business:

4118 PEACH DRIVE
JACKSONVILLE, FL 32246

New Principal Place of Business:

3451 SALAND WAY
SUITE 607
JACKSONVILLE, FL 32246

Current Mailing Address:

4118 PEACH DRIVE
JACKSONVILLE, FL 32246

New Mailing Address:

3451 SALAND WAY
SUITE 607
JACKSONVILLE, FL 32246

FEI Number: 26-0543599

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTICORENA, RAUL
4118 PEACH DRIVE
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

MARTICORENA, RAUL F
4118 PEACH DRIVE
JACKSONVILLE, FL 32246 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: RAUL F MARTICORENA

11/06/2008

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: MARTICORENA, RAUL
Address: 4118 PEACH DRIVE
City-St-Zip: JACKSONVILLE, FL 32246

Title: VP () Delete
Name: REYES, JUAN
Address: 3451 SALAND WAY #607
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: REYES, JUAN C
Address: 3451 SALAND WAY #607
City-St-Zip: JACKSONVILLE, FL 32246

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: RAUL F MARTICORENA

P

11/06/2008

Electronic Signature of Signing Officer or Director

Date