

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000089775

Entity Name: MY 3 SONS LOCKSMITH INC

FILED
Oct 29, 2008
Secretary of State

Current Principal Place of Business:

4016 3 STREET W
LEHIGH ACRES, FL 33971 US

New Principal Place of Business:

4907 2ND ST W
LEHIGH ACRES, FL 33971 US

Current Mailing Address:

4016 3 STREET W
LEHIGH ACRES, FL 33971 US

New Mailing Address:

4907 2ND ST W
LEHIGH ACRES, FL 33971 US

FEI Number: 26-0723198

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LABORI, NEIL
4016 3 STREET W
LEHIGH ACRES, FL 33971 US

Name and Address of New Registered Agent:

LABORI, NEIL
4907 2ND ST W
LEHIGH ACRES, FL 33971 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: NL

10/29/2008

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: LABORI, NEIL
Address: 4016 3 STREET W
City-St-Zip: LEHIGH ACRES, FL 33971 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LABORI, NEIL
Address: 4907 2ND ST W
City-St-Zip: LEHIGH ACRES, FL 33971 US

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: NL

P

10/29/2008

Electronic Signature of Signing Officer or Director

Date