2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 16, 2009
Secretary of State

DOCUMENT# P07000118981

Entity Name: SUPER GLASS WINDSHIELD REPAIR 257, INC.

Current Principal Place of Business:

175 CRISPIN STREET
MERRITT ISLAND, FL 32952

New Principal Place of Business:

Current Mailing Address:

175 CRISPIN STREET
MERRITT ISLAND, FL 32952

New Mailing Address:

FEI Number: 26-1421840 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, HOLLY H
175 CRISPIN STREET
MERRITT ISLAND, FL 32952 US

Name and Address of New Registered Agent:

SMITH, GARY R
175 CRISPIN STREET
MERRITT ISLAND, FL 32952 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: GARY R SMITH 10/16/2009
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 ( ) Delete
Name: SMITH, HOLLY H
Address: 175 CRISPIN STREET
City-St-Zip: MERRITT ISLAND, FL 32952

Title: VP ( ) Delete
Name: SMITH, GARY
Address: 175 CRISPIN STREET
City-St-Zip: MERRITT ISLAND, FL 32952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SMITH, GARY R
Address: 175 CRISPIN STREET
City-St-Zip: MERRITT ISLAND, FL 32952

Title: VP (X) Change ( ) Addition
Name: SMITH, HOLLY H
Address: 175 CRISPIN STREET
City-St-Zip: MERRITT ISLAND, FL 32952

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: GARY R SMITH P 10/16/2009
Electronic Signature of Signing Officer or Director Date