2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000123889

Entity Name: LOPES CLEANING SERVICES, CORP

FILED Nov 06, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2306 SW NEWPORT ISLES BLVD
PORT SAINT LUCIE, FL 34953
1831 NEWPORT ISLES BLVD
PORT SAINT LUCIE, FL 34953
US

Current Mailing Address: New Mailing Address:

2306 SW NEWPORT ISLES BLVD
PORT SAINT LUCIE, FL 34953
1831 NEWPORT ISLES BLVD
PORT SAINT LUCIE, FL 34953

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LOPES, MARCOS A SR
2306 SW NEWPORT ISLES BLVD
PORT SAINT LUCIE, FL 34953 US
LOPES, MARCOS A
1831 NEWPORT ISLES BLVD
PORT SAINT LUCIE, FL 34953 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: MARCOS A. LOPES 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PD (X) Change () Addition Name: LOPES, MARCOS A SR Name: LOPES, MARCOS A

Address: 2306 SW NEWPORT ISLES BLVD Address: 1831 NEWPORT ISLES BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34953 City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: VP () Delete Title: VPT (X) Change () Addition
Name: LOPES, MARILEIA P Name: LOPES, MARILEIA P

Address: 2306 NEWPORT ISLES BLVD Address: 1831 NEWPORT ISLES BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34953 City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: DR (X) Delete Title: () Change () Addition

 Name:
 LOPES, MARILEIA P
 Name:

 Address:
 2306 NEWPORT ISLES BLVD
 Address:

 City-St-Zip:
 PORT SAINT LUCIE, FL 34953
 City-St-Zip:

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: MARCOS A. LOPES PD 11/06/2008