

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P08000025485

**FILED**  
**Dec 14, 2010**  
**Secretary of State**

**Entity Name:** PAPERKRAFT COASTERS, INC.

**Current Principal Place of Business:**

116 CHESAPEAKE AVE  
TAMPA, FL 33606

**New Principal Place of Business:**

6225 118TH. AVE.  
LARGO, FL 33773

**Current Mailing Address:**

116 CHESAPEAKE AVE  
TAMPA, FL 33606

**New Mailing Address:**

6225 118TH. AVE.  
LARGO, FL 33773

**FEI Number:** 26-2148015

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILDE, ROBERT T  
116 CHESAPEAKE AVE  
TAMPA, FL 33606 US

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

WILDE, ROBERT T  
6225 118TH. AVE.  
LARGO, FL 33773 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: ROBERT T WILDE

12/14/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: REDDEN, STEVEN D  
Address: 6225 118TH. AVE.  
City-St-Zip: LARGO, FL 33773

Title: DVTS  
Name: WILDE, ROBERT T  
Address: 6225 118TH. AVE.  
City-St-Zip: LARGO, FL 33773

Title: S  
Name: WISE, RICHARD L  
Address: 51 WASHINGTON SQUARE NORTH  
City-St-Zip: SALEM, MA 01970

Title: VPCA  
Name: MOORE, TED  
Address: 6225 118TH. AVE.  
City-St-Zip: LARGO, FL 33773

Title: DIR  
Name: RIZZO, MICHAEL  
Address: 6225 118TH.AVE.  
City-St-Zip: LARGO, FL 33773

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: TED MOORE

VPCA

12/14/2010

Electronic Signature of Signing Officer or Director

Date