

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P08000046146

Entity Name: E.L.W.JANITORIAL INC.

**FILED**  
**Feb 10, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

3010 W BINNICKER AVE APT 1  
TAMPA, FL 33611

## **New Principal Place of Business:**

6603 S MACDILL AVE  
APT A  
TAMPA, FL 33611

## **Current Mailing Address:**

3010 W BINNICKER AVE APT 1  
TAMPA, FL 33611

## **New Mailing Address:**

6603 S MACDILL AVE  
APT A  
TAMPA, FL 33611

FEI Number: 59-3062346

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

WAX, EMANUEL  
3905 W LEILA AVE  
TAMPA, FL 33616 US

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

WAX, EMANUEL  
3801 W WALLACE AVE  
APT 1  
TAMPA, FL 33611 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: EMANUEL WAX

02/10/2010

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: D/P  
Name: WAX, EMANUEL  
Address: 3801 W WALLACE AVE APT 2  
City-St-Zip: TAMPA, FL 33611

Title: VP  
Name: WAX, WILMA  
Address: 3801 W WALLACE AVE APT 2  
City-St-Zip: TAMPA, FL 33611

Title: MA  
Name: EVANS, PATRICIA  
Address: 6603 S MACDILL AVE APT A  
City-St-Zip: TAMPA, FL 33611

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: EMANUEL WAX

OWER

02/10/2010

Electronic Signature of Signing Officer or Director

Date