

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000049476

Entity Name: B-N-B GREENWORKS, INC.

FILED
Sep 28, 2009
Secretary of State

Current Principal Place of Business:

5900 SW 196 LN
SW RANCHES, FL 33332 US

New Principal Place of Business:

Current Mailing Address:

5900 SW 196 LN
SW RANCHES, FL 33332 US

New Mailing Address:

FEI Number: 26-2635495

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THE LAW OFFICES OF NICK SPRADLIN, PLLC
12000 NORTH DALE MABRY HWY
SUITE 110
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

BLOOM, BERNARD N OWNER
5900SW 196 LANE
SW.RANCHES, FL 33332 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: BERNARD N.BLOOM

09/28/2009

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: D () Delete
Name: BLOOM, BERNARD N
Address: 5900 SW 196 LN
City-St-Zip: SW RANCHES, FL 33332 US

Title: P () Delete
Name: BLOOM, BERNARD N
Address: 5900 SW 196 LN
City-St-Zip: SW RANCHES, FL 33332 US

Title: S () Delete
Name: BLOOM, BERNARD N
Address: 5900 SW 196 LN
City-St-Zip: SW RANCHES, FL 33332 US

Title: T () Delete
Name: BLOOM, BERNARD N
Address: 5900 SW 196 LN
City-St-Zip: SW RANCHES, FL 33332 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: BERNARD N.BLOOM

D

09/28/2009

Electronic Signature of Signing Officer or Director

Date