2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000053973

Address:

City-St-Zip:

6760 FRANKLIN ST.

HOLLYWOOD, FL 33024

FILED Oct 08, 2009 Secretary of State

Entity Nar	ne: PRIMO RE	EMODELING INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
6760 FRAN HOLLYWC	NKLIN ST. POD, FL 33024	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
6760 FRAN HOLLYWC	NKLIN ST. POD, FL 33024	US			
FEI Number:	26-2677244	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	urrent Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
6760 FRAN	, ANTHONY J NKLIN ST. OOD, FL 33024	US			
The above in the State		ubmits this statement for the	e purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE: ANTHONY				
Electronic Signature of Registered Agent In accordance with s. 607.193(2)(b), F.S., the corporation did not receive				Date	
		(2)(b), F.S., the corporation did Trust Fund Contribution ().	not receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES () I FONTANA, ANTH 6760 FRANKLIN HOLLYWOOD, F	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TRES () I FONTANA, ANTH 6760 FRANKLIN HOLLYWOOD, F	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	SECR () I FONTANA, ANTH	Delete IONY J	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: ANTHONY FONTANA **PRES** 10/08/2009