## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P08000073397

Entity Name: FRESH START CLEANING OF NEW SMYRNA BEACH INC

FILED Dec 10, 2009 Secretary of State

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

4630 KATY DR 807 WAYNE AVE

NEW SMYRNA BEACH, FL 32169 NEW SMYRNA BEACH, FL 32168

Current Mailing Address: New Mailing Address:

4630 KATY DR 807 WAYNE AVE

NEW SMYRNA BEACH, FL 32169 NEW SMYRNA BEACH, FL 32168

FEI Number: 26-3118117 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PIMENTAL, TERRI PIMENTAL, TERRI 4630 KATY DR 807 WAYNE AVE

NEW SMYRNA BEACH, FL 32169 US NEW SMYRNA BEACH, FL 32168 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: TERRI PIMENTAL 12/10/2009

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 PIMENTAL, TERRI
 Name:
 PIMENTAL, TERRI

 Address:
 4630 KATY DR
 Address:
 807 WAYNE AVE

City-St-Zip: NEW SMYRNA BEACH, FL 32169 City-St-Zip: NEW SMYRNA BEACH, FL 32168

 Name:
 PIMENTAL, PETER
 Name:
 PIMENTAL, PETER

 Address:
 4630 KATY DR
 Address:
 807 WAYNE AVE

City-St-Zip: NEW SMYRNA BEACH, FL 32169 City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: TERRI PIMENTAL PRES 12/10/2009