2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000100828

City-St-Zip:

SPRINGFIELD GARDENS, NY 11413

FILED Dec 14, 2009 Secretary of State

Entity Nan	ne: KPJRE	ESOURCES INC					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
8951 NW 5 SUNRISE,							
Current Mailing Address:			New Maili	New Mailing Address:			
8951 NW 5 SUNRISE,							
FEI Number:	80-0306947	FEI Number Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of	f Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
JOLLY, JUL 8951 NW 5 SUNRISE,	3RD ST	US					
The above in the State		y submits this statement for the p	urpose of changing i	ts registered o	office or registered agent, or	both,	
SIGNATUR							
	Electr	onic Signature of Registered Age	nt		Date		
		193(2)(b), F.S., the corporation did not ing Trust Fund Contribution ().	receive the prior notic	e.			
OFFICERS		= ' '	ADDITION	S/CHANGES	TO OFFICERS AND DIREC	CTORS:	
Title: Name: Address: City-St-Zip:	P JOLLY, JULI 8951 NW 53 SUNRISE, FI	RD ST	Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address: City-St-Zip:	DUNILLEY, H 13726 BEDE		Title: Name: Address: City-St-Zip:	DUNKLEY, HO 13726 BEDELI			
Title: Name: Address:	D FRANCIS, K 13726 BEDE		Title: Name: Address:	() 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.

City-St-Zip:

SIGNATURE: JULIA JOLLY Ρ 12/14/2009