

# **2006 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P92000011433

**FILED**  
**Oct 16, 2006**  
**Secretary of State**

**Entity Name:** COMPLETE CAR CARE OF PINELLAS, INC.

**Current Principal Place of Business:**

2255 STARKEY ROAD  
LARGO, FL 33771 US

**New Principal Place of Business:**

**Current Mailing Address:**

2255 STARKEY ROAD  
LARGO, FL 33771 US

**New Mailing Address:**

**FEI Number:** 59-3151249

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLAXTON, ROGER  
10525 127TH PLACE  
LARGO, FL 33773 US

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

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:** ROGER CLAXTON

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: P ( ) Delete  
Name: CLAXTON, ROGER  
Address: 10525 127TH PLACE  
City-St-Zip: LARGO, FL 33773

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify for the 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:** ROGER CLAXTON

P

10/16/2006

Electronic Signature of Signing Officer or Director

Date