

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P96000095511

**FILED**  
**Mar 22, 2012**  
**Secretary of State**

**Entity Name:** SONSHINE DRYWALL & METAL FRAMING, INC.

**Current Principal Place of Business:**

100 BUSINESS CENTER STE 1  
SUITE 1  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

18 WINCHESTER ROAD  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

100 BUSINESS CENTER STE 1  
SUITE 1  
ORMOND BEACH, FL 32174

**New Mailing Address:**

18 WINCHESTER ROAD  
ORMOND BEACH, FL 32174

**FEI Number:** 59-3500612

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAMPE, BRUCE A  
18 WINCHESTER  
ORMOND BEACH, FL 32176 US

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

LAMPE, BRUCE A  
18 WINCHESTER  
ORMOND BEACH, FL 32174 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: BRUCE A. LAMPE

03/22/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: LAMPE, BRUCE A  
Address: 18 WINCHESTER ROAD  
City-St-Zip: ORMOND BEACH, FL 32174

I hereby 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 all other like empowered.

SIGNATURE: BRUCE A. LAMPE

PRES

03/22/2012

Electronic Signature of Signing Officer or Director

Date