

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000012795

Entity Name: DIVINE PAINTING, INC.

FILED
May 28, 2009
Secretary of State

Current Principal Place of Business:

18800 NW 29TH AVE
MIAMI GARDENS, FL 33056

New Principal Place of Business:

Current Mailing Address:

18800 NW 29TH AVE
MIAMI GARDENS, FL 33056

New Mailing Address:

FEI Number: 65-0812305

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CROSBY, DENISE S VPST
18800 NW 29TH AVE
MIAMI GARDENS, FL 33056 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: DENISE SANDR CROSBY

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: VPST () Delete
Name: CROSBY, SANNISE S VPST
Address: 2280 E PRESERVE WAY APT 305
City-St-Zip: MIRAMAR, FL 33025

Title: PST () Delete
Name: CROSBY, GAMAL PST
Address: 18800 NW 29TH AVE
City-St-Zip: MIAMI GARDENS, FL 33056

Title: VPST () Delete
Name: CROSBY, DENISE S VPST
Address: 18800 NW 29TH AVE
City-St-Zip: MIAMI GARDENS, FL 33056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPST (X) Change () Addition
Name: CROSBY, SANNISE S VPST
Address: 18800 NW 29TH AVE
City-St-Zip: MIAMI GARDENS, FL 33056

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

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

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: DENISE SANDRA CROSBY

Electronic Signature of Signing Officer or Director

VSPT

05/28/2009

Date