2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000078621

City-St-Zip:

TAMPA, FL 33604

Entity Name: PBS CONSTRUCTION SERVICES INC

FILED Oct 10, 2005 Secretary of State

Entity Na	me: PBS COI	NSTRUCTION SERVICES, INC).		
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
5407 N. FL TAMPA, F	_ORIDA AVEN L 33604 US				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
PO BOX 9 TAMPA, F		3			
FEI Number	: 59-3530855	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:					
	SY TIMBER T	RAIL US			
	e named entity e of Florida.	submits this statement for the p	urpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE: RICKY M	AHAN			
	Electron	nic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (MAHAN, RICKY 2913 MOSSY T VALRICO, FL	TIMBER TRAIL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD (MAHAN, NATAI 2913 MOSSY T VALRICO, FL	TIMBER TRAIL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VD (WISE, SUSAN 9016 FLORA V) Delete ISTA AVE.	Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICKY MAHAN PD 10/10/2005