## 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# S12421

Entity Name: ROSE & LEWIS ENTERPRISES, INC.

FILED Jun 08, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

606 HERCHEL DR 5048 WESLEY DRIVE TEMPLE TERRACE, FL 33617 US TAMPA, FL 33647 US

Current Mailing Address: New Mailing Address:

606 HERCHEL DR 5048 WESLEY DRIVE TEMPLE TERRACE, FL 33617 US TAMPA, FL 33647 US

FEI Number: 59-3050127 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:

AHRENS, NICHOLA G.

11812 56TH STREET NORTH
TEMPLE TERRACE, FL 33617 US

MARK ROSE
5048 WESLEY DRIVE
TAMPA, FL 33647 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: MARK ROSE 06/08/2008

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 LEWIS, MICHAEL T.,
 Name:
 DENISE ROSE,

 Address:
 606 HERCHEL DR
 Address:
 5048 WESLEY DRIVE

 City-St-Zip:
 TEMPLE TERRACE, FL 33617
 City-St-Zip:
 TAMPA, FL 33647

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 ROSE, MARK H.,
 Name:
 ROSE, MARK H.,

 Address:
 606 HERCHEL DR
 Address:
 5048 WESLEY DRIVE

 City-St-Zip:
 TEMPLE TERRACE, FL 33617
 City-St-Zip:
 TAMPA, FL 33647

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 ROSE D 06/08/2008