2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 27, 2005
Secretary of State

DOCUMENT# P00000077407

Entity Name: AMAZING QUALITY PAINTING, INC.

Current Principal Place of Business:

11263 SW 12 CT
DAVIE, FL 33325

New Principal Place of Business:

9480 NW 55TH ST
SUNRISE, FL 33351

Current Mailing Address:

11263 SW 12 CT
DAVIE, FL 33325

New Mailing Address:

9480 NW 55TH ST
SUNRISE, FL 33351

FEI Number: 65-1029556 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPANO BEACH, FL 33064 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: TAX HOUSE CORPORTATION
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: D ( ) Delete
Name: SILVA, ELI
Address: 11263 SW 12 CT
City-St-Zip: DAVIE, FL 33325

Title: D ( ) Delete
Name: SILVA, CARMELITA F
Address: 11263 SW 12 CT
City-St-Zip: DAVIE, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SILVA, ELI
Address: 9480 NW 55TH ST
City-St-Zip: SUNRISE, FL 33351

Title: D (X) Change ( ) Addition
Name: SILVA, CARMELITA F
Address: 9480 NW 55TH ST
City-St-Zip: SUNRISE, FL 33351

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.

SIGNATURE: CARMELITA F SILVA D 09/27/2005
Electronic Signature of Signing Officer or Director Date