

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000142319

Entity Name: AGUILA'S STUCCO, INC.

FILED  
Nov 30, 2007  
Secretary of State

**Current Principal Place of Business:**

1420 SHELLPOINT RD  
RUSKIN, FL 33570

**New Principal Place of Business:**

**Current Mailing Address:**

1420 SHELLPOINT RD  
RUSKIN, FL 33570

**New Mailing Address:**

1420 E SHELLPOINT RD  
RUSKIN, FL 33570

FEI Number: 20-3688648

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

GARCIA, OMAR  
1420 SHELLPOINT RD  
RUSKIN, FL 33570 US

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

GARCIA, OMAR  
1420 E SHELLPOINT RD  
RUSKIN, FL 33570 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: OMAR GARCIA

11/30/2007

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: GARCIA, OMAR  
Address: 1420 SHELLPOINT RD  
City-St-Zip: RUSKIN, FL 33570

Title: O ( ) Delete  
Name: DOMINGUEZ, ROBERTO  
Address: 110 12TH AVE SE  
City-St-Zip: RUSKIN, FL 33570

Title: O (X) Delete  
Name: SALDIVER, HUMBERTO  
Address: 110 12TH AVE SE  
City-St-Zip: RUSKIN, FL 33570

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: GARCIA, OMAR  
Address: 1420 E SHELLPOINT RD  
City-St-Zip: RUSKIN, FL 33570

Title: O (X) Change ( ) Addition  
Name: DOMINGUEZ, BERTHA R  
Address: 1420 E SHELLPOINT RD  
City-St-Zip: RUSKIN, FL 33570

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: OMAR GARCIA

D

11/30/2007

Electronic Signature of Signing Officer or Director

Date