

2008 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 14, 2008
Secretary of State**

DOCUMENT# P06000111375

Entity Name: A & V CUSTOM FURNITURE, CORP.

Current Principal Place of Business:

1569 NW 28 ST
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

1569 NW 28 ST
MIAMI, FL 33142

New Mailing Address:

FEI Number: 20-5446982 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALVAREZ, JOSE
1569 NW 28 ST
MIAMI, FL 33142 US

Name and Address of New Registered Agent:

VIALES, JEFFREY
1569 NW 28 ST
MIAMI, FL 33142 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: JEFFREYVIALES 10/14/2008
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:

Title: DP () Delete
Name: ALVAREZ, JOSE
Address: 1569 NW 28 ST
City-St-Zip: MIAMI, FL 33142

Title: V () Delete
Name: VIALES, JEFFREY
Address: 1569 NW 28 ST
City-St-Zip: MIAMI, FL 33142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JEFFREYVIALES V 10/14/2008
Electronic Signature of Signing Officer or Director Date