FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90183 022 ***158.75

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 611027

1. Entity Name: CORNERSTONE RESTORATIONS, INC.

11010244

Principal Place of Business	Mailing Address
690 OSCEOLA AVE #303 WINTER PARK, FL 32789 US	690 OSCEOLA AVE #303 WINTER PARK, FL 32789 US

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
690 Osceola Ave	690 Osceola Ave
Suite, Apt. #, etc.: #306	Suite, Apt. #, etc.: #306
City & State: WINTER PARK, FL	City & State: WINTER PARK, FL
Zip: 32789 Country: ORANGE	Zip: 32789 Country: ORANGE

4. FEI Number: 59-1931156 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DAVICH, IRENE 690 OSCEOLA AVE #303 WINTER PARK, FL 32789	Name: MICHAEL DOUGLAS DAVICH Street Address (P.O. Box Number is Not Acceptable): 690 Osceola Ave. #306 City: WINTER PARK FL Zip Code: 32789

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Michael D. Davich, PRESIDENT 4/15/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00 After May 1, 2003 Fee will be $550.00 Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: P NAME: DAVICH, M D STREET ADDRESS: 95046 HOKUIWA ST 15 CITY-ST-ZIP: MILILANI, HI 96789	☐ Delete	TITLE: PRESIDENT NAME: MICHAEL D. DAVICH STREET ADDRESS: 690 Osceola Ave #306 CITY-ST-ZIP: WINTER PARK, FL 32789	☑ Change ☐ Addition
TITLE: ST NAME: DAVICH, ANITA P STREET ADDRESS: 95046 HOKUIWA ST #15 CITY-ST-ZIP: MILILANI, HI 96789	☐ Delete	TITLE: VICE-PRESIDENT NAME: ANNA C. D. LOHR STREET ADDRESS: 2839 TECH DRIVE CITY-ST-ZIP: ORLANDO, FL 32817	☐ Change ☑ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Delete	TITLE: SEC/TREAS NAME: ANITA P DAVICH STREET ADDRESS: 690 Osceola Ave #306 CITY-ST-ZIP: WINTER PARK, FL 32789	☑ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
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CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael D. Davich Michael D. DAVICH 4/15/03 407 644 1150
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #