FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

03 OCT 30 PM 4:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F01608

1. Corporation Name

AAA SIDING COMPANY, INC.

REINSTATEMENT 03

2. Principal Office Address	3. Mailing Office Address
230 SE 20TH CT.	230 SE 20TH CT.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: CAPE CORAL, FL	City & State: CAPE CORAL, FL.
Zip: 33990 Country: US	Zip: 33990 Country: US

4. Date Incorporated or Qualified To Do Business in Florida: 10-15-80

5. FEI Number: 59-2301195 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name: THOMAS P. PARDO

000024287121
10/30/03--01033--007 **50.00

Street Address (P.O. Box Number is Not Acceptable): 230 SE. 20TH CT.

Suite, Apt. #, Etc.:

City: CAPE CORAL State: FL Zip Code: 33990

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Thomas P Pardo Date: 10-23-03
REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	PATRICIA PARDO	3012 RIVERVIEW DR.	NORFORK, AR. 72658
S	THOMAS PARDO	230 SE 20TH CT.	CAPE CORAL, FL. 33990
T	ROBERT E. HOOKER, JR.	230 SE 20TH CT.	CAPE CORAL, FL. 33990

10. I certify that I am an officer or director of the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Patricia Pardo PATRICIA PARDO 10-23-03 870-499-7171
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

October 23, 2003

AAA Siding Co., Inc.
230 S.E. 20th CT.
Cape Coral, Fl. 33990

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL. 32314

RE: Corporate Reinstatement
Document # F01608

As instructed by phone conversation by one of your agents, I am filing a corporate reinstatement form. Our UBR forms for 2003 were not received due to a change of address, therefore were not filed. I was instructed to send the $150.00 UBR filing fee with the enclosed form.

Sincerely,

Patricia Pardo

Patricia Pardo
AAA Siding Co., Inc.