## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F05000003161

Title:

Name:

Address:

City-St-Zip:

Entity Name: PINNACLE DESIGN/BUILD GROUP, INCORPORATED

FILED Oct 12, 2006 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
6030 BETHELVIEW RD., SUITE 304 CUMMING, GA 30040				5995 PARKWAY NORTH BLVD. CUMMING, GA 30040			
Current Mailing Address:				New Mailing Address:			
6030 BETHELVIEW RD., SUITE 304 CUMMING, GA 30040				5995 PARKWAY NORTH BLVD. CUMMING, GA 30040			
FEI Number:	58-2293950	FEI Number Applied For ( )	FEI Numb	er Not Appli	cable ( )	Certificate of Status Des	sired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
1201 HAYS	ATION SERVICI S STREET SSEE, FL 3230						
The above in the State		ubmits this statement for the p	urpose of c	changing its	s registered of	fice or registered age	nt, or both,
SIGNATUR	RE: CORPORA	ATION SERVICE COMPANY					
Electronic Signature of Registered Agent				Date			
Election Can	npaign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip: Title:	HARRIS, JOSEP 115 HVLEN WAY ALPHARETTA, G VCST ( )	, A 30040 Delete	N A C	itle: lame: ddress: city-St-Zip: itle:	HARRIS, JOSEP 115 HULEN WAY ALPHARETTA, G COO (X)	Y 6A 30040 Change ( ) Addition	
Name: Address: City-St-Zip:	HARRIS, MARYL 115 HVLEN WAY ALPHARETTA, G	,	Α	lame: \ddress: City-St-Zip:	VALERO, STEPH 4010 NEW CHAI CUMMING, GA	PEL HILL WAY	
Title: Name: Address: City-St-Zip:	DVP (X) HARRIS, THOMA 2851 ROBERS A CINCINNATI, LH	VE	N A	ītle: lame: \ddress: City-St-Zip:	( )	Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JOSEPH E. HARRIS CP 10/12/2006

(X) Delete

HARRIS, JEAN

5770 RANLYN AVE

CINCINNATI, OH 45239

() Change () Addition