2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 19, 2004
Secretary of State

DOCUMENT# H49811

Entity Name: CARRIAGE TRADE OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1109 USTLER ROAD
APOPKA, FL 32712 US

New Principal Place of Business:

Current Mailing Address:

1109 USTLER ROAD
APOPKA, FL 32712 US

New Mailing Address:

FEI Number: 59-2540667 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARLIN, PHILIP A
125 S. SWOOPE AVENUE
SUITE 104
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

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: _____

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: PD ( ) Delete
Name: RAMPERSAD, STEPHEN,
Address: 1109 USTLER ROAD
City-St-Zip: APOPKA, FL

Title: VD ( ) Delete
Name: RAMPERSHAD, STEPHEN M
Address: 1109 USTLER RD
City-St-Zip: APOPKA, FL 32712

Title: V ( ) Delete
Name: RAMPERSHAD, CHRISTOPHER J
Address: 1109 USTLER RD
City-St-Zip: APOPKA, FL 32712

Title: T ( ) Delete
Name: DOERING, JENNIFER E
Address: 1109 USTLER RD
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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 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: STEPHEN RAMPERSAD MR. 10/19/2004

Electronic Signature of Signing Officer or Director Date