2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 06, 2006
Secretary of State

DOCUMENT# M00194

Entity Name: LEMOIN AND LEMOIN ENTERPRISES, INC.

Current Principal Place of Business:

5701 NW 46 DRIVE
CORAL SPRINGS, FL 33067 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1724
POMPANO BEACH, FL 33061

New Mailing Address:

FEI Number: 59-2475189 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEE, ALFONSO D SR
5701 NW 46 DRIVE
CORAL SPRINGS, FL 33067 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: ALFONZO LEE
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LEE, ALFONSO SR
Address: 5701 NW 46 DRIVE
City-St-Zip: CORAL SPRINGS, FL 33067 US

Title: VP ( ) Delete
Name: LEE, ANDREA
Address: 5701 NW 46TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: T ( ) Delete
Name: LEE, RODNEY
Address: 5701 NW 46TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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: S ( ) Change (X) Addition
Name: LEE, SONYA
Address: 5701 NW 46TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33067

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.

SIGNATURE: ALFONZO LEE P 11/06/2006
Electronic Signature of Signing Officer or Director — Date