

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000016129

Entity Name: TECTONIC GROUP INC

FILED  
Oct 06, 2007  
Secretary of State

## Current Principal Place of Business:

931 SW 171 TERR  
PEMBROKE PINES, FL 33027

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 822606  
PEMBROKE PINES, FL 33082

## New Mailing Address:

FEI Number: 65-1001637

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SHAMS, A.R.A  
931 SW 171 TERR  
PEMBROKE PINES, FL 33027 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: A . RAOF . A - SHAMS

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: CEO ( ) Delete  
Name: SHAMS, A.R.A  
Address: 931 SW 171 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33027

Title: P ( ) Delete  
Name: SHAMS, A.R.A  
Address: 931 SW 171 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33027

Title: VP ( ) Delete  
Name: BAZARGAN, MARYAM  
Address: 931 SW 171 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33027

## 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:

I hereby certify that the information supplied with this filing does not qualify 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: A . RAOF . A - SHAMS

CEO

10/06/2007

Electronic Signature of Signing Officer or Director

Date