

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000038008

FILED
Oct 25, 2006
Secretary of State

Entity Name: M.N.S. ALUMINUM, GLASS & TILES INC.

Current Principal Place of Business:

285 NE 185 ST
BAY 17
NORTH MIAMI BCH, FL 33179

New Principal Place of Business:

285 NE 185 ST
BAY 17
NORTH MIAMI BEACH, FL 33179

Current Mailing Address:

285 NE 185 ST
BAY 17
NORTH MIAMI BCH, FL 33179

New Mailing Address:

FEI Number: 58-2621097 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PASALIDIS, MINAS
285 NE 185 ST
BAY 17
NORTH MIAMI BCH, FL 33179 US

Name and Address of New Registered Agent:

LATIN AMERICAN ACCOUNTING SVCS INC
1800 WEST 49TH STREET
134
HIALEAH, FL 33012 US

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: ISABEL PENA 10/25/2006

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: P () Delete
Name: PASOLIDIS, MINAS
Address: 8192 NW 201 TERRACE
City-St-Zip: HIALEAH, FL 33015

Title: VP () Delete
Name: PASALIDIS, NELVIS
Address: 8192 NW 201 TERRACE
City-St-Zip: HIALEAH, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PASALIDIS, MINAS
Address: 8192 NW 201 TERRACE
City-St-Zip: HIALEAH, FL 33015

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 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: PASALIDIS NELVYS VP 10/25/2006

Electronic Signature of Signing Officer or Director Date