

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000058109

Entity Name: M & J ALFONSO CORPORATION

FILED
Jun 27, 2006
Secretary of State

Current Principal Place of Business:

5891 WEST 3 CT
HIALEAH, FL 33012

New Principal Place of Business:

5881 WEST 3 CT
HIALEAH, FL 33012

Current Mailing Address:

5891 WEST 3 CT
HIALEAH, FL 33012

New Mailing Address:

5881 WEST 3 CT
HIALEAH, FL 33012

FEI Number: 65-1112178

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALFONSO, JULIO
5891 WEST 3 CT
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

ALFONSO, JULIO
5881 WEST 3 CT
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: JULIO ALFONSO

06/27/2006

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: DPT () Delete
Name: ALFONSO, JULIO
Address: 5361 NW 201 ST ST
City-St-Zip: MIAMI, FL 33055

Title: DVS () Delete
Name: MAURENCE, MAYRA
Address: 5361 NW 201 ST ST
City-St-Zip: MIAMI, FL 33055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: ALFONSO, JULIO
Address: 5881 WEST 3RD COURT
City-St-Zip: HIALEAH, FL 33012

Title: DVS (X) Change () Addition
Name: MAURENCE, MAYRA
Address: 5881 WEST 3RD COURT
City-St-Zip: HIALEAH, FL 33012

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: MAYRA MAURENCE

DVS

06/27/2006

Electronic Signature of Signing Officer or Director

Date