

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000014097 1. Entity Name ALL SECURE LOCKSMITH, INC.				FILED 05 SEP -9 AM 11:09 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 2024 NORTHEAST 174TH STREET NORTH MIAMI, FL 33179		Mailing Address 2024 NORTHEAST 174TH STREET NORTH MIAMI, FL 33179			
2. Principal Place of Business 6751 SW 48 Terrace Suite, Apt. #, etc.		3. Mailing Address P.O. Box 601094 Suite, Apt. #, etc.			
City & State Miami, FL Zip 33155		City & State North Miami Beach, FL Zip 33160-4090		4. FEI Number 06-1677894 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SOUTHWEST 22 STREET 4TH FLOOR MIAMI, FL 33145			7. Name and Address of New Registered Agent Name SPIEGEL & utrera, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 Southwest 22 Street, 4th Floor City Miami FL Zip 33145		
8. 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. I am familiar with, and accept the obligations of registered agent, SPIEGEL & UTRERA, P.A. SIGNATURE: Natalia Utrera, Vice President 9/6/05 <small>Signature, typed or printed name of registered agent and title is applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$300.00			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD BURGOS, HOWARD 2024 NORTHEAST 174TH STREET NORTH MIAMI, FL 33179	<input type="checkbox"/> Delete			
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Howard Burgos 09/06/05 305-919-8949 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ALL SECURE LOCKSMITH, INC.

**P.O. BOX 601094
NORTH MIAMI BEACH, FL 33160
DADE: (305) 919-8949
FAX: (305) 919-8349
BROWARD: (954) 962-1980**

September 8, 2005

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To whom it may concern:

This letter is to inform you that the corporation or I never received the prior notice. I was just recently made aware that the status of the corporation was inactive. I am actively working to have the corporation reinstated as quickly as possible. I would greatly appreciate prompt notice of any other documents necessary to move this process along as quickly as possible. You may contact me by telephone or fax at any of the numbers shown above. Thank you in advance for any assistance you may be able to offer.

Sincerely,

A handwritten signature in black ink, appearing to read "Howard H. Burgos", with a stylized flourish at the end.

Howard H. Burgos
President