

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000016058

Entity Name: AZTECA PAINTING, INC.

FILED
Feb 23, 2006
Secretary of State

Current Principal Place of Business:

14436 SEMINOLE TRAIL
WIMAUMA, FL 33598

New Principal Place of Business:

PO BOX 473
PARRISH, FL 34219 US

Current Mailing Address:

14436 SEMINOLE TRAIL
WIMAUMA, FL 33598

New Mailing Address:

PO BOX 473
PARRISH, FL 34219 US

FEI Number: 06-1677630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARRALDE, JAIME
14436 SEMINOLE TRAIL
WIMAUMA, FL 33598 US

Name and Address of New Registered Agent:

LARRALDE, JAIME
802 LIGHTFOOT RD
WIMAUMA, FL 33598 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: JAIME LARRALDE

02/23/2006

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: LARRALDE, JAIME
Address: 14436 SEMINOLE TRAIL
City-St-Zip: WIMAUMA, FL 33598

Title: V () Delete
Name: LARRALDE, JERAMY A
Address: 14436 SEMINOLE TRAIL
City-St-Zip: WIMAUMA, FL 33598

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LARRALDE, JAIME
Address: PO BOX 473
City-St-Zip: PARRISH, FL 34219 US

Title: VP (X) Change () Addition
Name: LARRALDE, JERAMY A
Address: PO BOX 473
City-St-Zip: PARRISH, FL 34219 US

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: JAIME LARRALDE

P

02/23/2006

Electronic Signature of Signing Officer or Director

Date