2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 02, 2005
Secretary of State

DOCUMENT# P03000040276

Entity Name: SMART RENOVATIONS, INC.

Current Principal Place of Business:

655 GLADES CIRCLE
APT. #119
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

577 CALIBRE CREST PKWY
APT. #104
ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address:

655 GLADES CIRCLE
APT. #119
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

577 CALIBRE CREST PKWY
APT. #104
ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 51-0458036 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PAVON, ARIEL
655 GLADES CIRCLE
APT. #119
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

PAVON, ARIEL
577 CALIBRE CREST PKWY
APT. #104
ALTAMONTE SPRINGS, FL 32714 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: ARIEL PAVON 12/02/2005
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: PAVON, ARIEL
Address: 655 GLADES CIRCLE #119
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PAVON, ARIEL
Address: 577 CALIBRE CREST PKWY #104
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ARIEL PAVON P 12/02/2005
Electronic Signature of Signing Officer or Director Date