

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000059080

Entity Name: SOUTHWEST 4 HOUSING, INC.

FILED
Apr 11, 2005
Secretary of State

Current Principal Place of Business:

20816 SW 86 AVE
MIAMI, FL 33189

New Principal Place of Business:

Current Mailing Address:

20816 SW 86 AVE
MIAMI, FL 33189

New Mailing Address:

17521 SW 73 CT
VILLAGE OF PALMETTO, FL 33157

FEI Number: 32-0081658

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEPHEN, ILFRENISE
20816 SW 86 AVE
MIAMI, FL 33189 US

Name and Address of New Registered Agent:

CHARLEMAGNE, ILFRENISE
17521 SW 73 CT
VILLAGE OF PALMETTO BAY, FL 33157 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: ILFRENISE CHARLEMAGNE

04/11/2005

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: D () Delete
Name: STEPHEN, ILFRENISE
Address: 20816 SW 86 AVE
City-St-Zip: MIAMI, FL 33189

Title: D () Delete
Name: CINE, SOLEDAD
Address: 20816 SW 86 AVE
City-St-Zip: MIAMI, FL 33189

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CHARLEMAGNE, ILFRENISE
Address: 17521 SW 73 CT
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33157

Title: D (X) Change () Addition
Name: CHARLEMAGNE, ILFRENISE
Address: 17521 SW 73 CT
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33157

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: ILFRENISE CHARLEMAGNE

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04/11/2005

Electronic Signature of Signing Officer or Director

Date