

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000068345

FILED
Feb 13, 2007
Secretary of State

Entity Name: STATES QUALITY BUILDING, INC.

Current Principal Place of Business:

1045 W BUSCH BLVD.
TAMPA, FL 33612 US

New Principal Place of Business:

7028 W WATERS AVE.
SUITE 230
TAMPA, FL 33634 US

Current Mailing Address:

7028 W WATERS AVE.
SUITE 230
TAMPA, FL 33634

New Mailing Address:

7028 W WATERS AVE.
SUITE 230
TAMPA, FL 33634 US

FEI Number: 65-1194694

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERRERA, MILKA
7028 W WATERS AVE. STE 230
TAMPA, FL 33634 US

Name and Address of New Registered Agent:

TREJO, LUIS A
14644 MLK BLVD
DOVER, FL 33527 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: LUIS ADOLFO TREJO

02/13/2007

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: T () Delete
Name: GOMEZ, MARCELA
Address: 5303 ARCHSTONE DR., APT 205
City-St-Zip: TAMPA, FL 33634

Title: P () Delete
Name: MENDOZA, GUSTAVO
Address: 5303 ARCHSTONE DR., APT 3-205
City-St-Zip: TAMPA, FL 33634

Title: V (X) Delete
Name: MENDOZA, ALEXEI
Address: 4333 BAYSIDE VILLAGE DRIVE, APT. 229
City-St-Zip: TAMPA, FL 33615

Title: S (X) Delete
Name: GOMEZ, CARLOS
Address: 6941 BELTLINK LOOP
City-St-Zip: WESLEY CHAPEL, FL 33634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MENDOZA, GUSTAVO
Address: 4410 GULF CLUB LN
City-St-Zip: TAMPA, FL 33624 US

Title: VP (X) Change () Addition
Name: MENDOZA, ALEXEI
Address: 17112 CARRINGTON PARK DR APT 914
City-St-Zip: TAMPA, FL 33647 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GUSTAVO MENDOZA

PD

02/13/2007

Electronic Signature of Signing Officer or Director

Date