2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000073548

Entity Name: EUROPEAN MODELING STUCCO, INC

FILED Dec 12, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

8340 SANDS POINT BLVD 6720 NW 70 ST APTO P -302 TAMARAC, FL 33321 TAMARAC, FL 33321

Current Mailing Address: New Mailing Address:

8340 SANDS POINT BLVD 6720 NW 70 ST APTO P -302 TAMARAC, FL 33321

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CAMPO, ELSA
8340 SANDS POINT BLVD
APTO. P -302
TAMARAC, FL 33321 US

CAMPO, ELSA
6720 NW 70 ST
TAMARAC, FL 33321 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: ELSA CAMPO 12/12/2005

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 Title: P (X) Change () Addition

 Name:
 CAMPO, ELSA
 Name:
 CAMPO, ELSA

 Address:
 8340 SANDS POINT BLVD APTO P-302
 Address:
 6720 NW 70 ST

 City-St-Zip:
 TAMARAC, FL 33321
 City-St-Zip:
 TAMARAC, FL 33321

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 PADUREAN, IOAN
 Name:
 PADUREAN, IOAN

 Address:
 8340 SANDS POINT BLVD APTO P-302
 Address:
 6720 NW 70 ST

 City-St-Zip:
 TAMARAC, FL 33321
 City-St-Zip:
 TAMARAC, FL 33321

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: ELSA CAMPO P 12/12/2005