

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000078171

FILED
Jan 12, 2005
Secretary of State

Entity Name: SHAMAN'S MAINTENANCE SERVICES, INC.

Current Principal Place of Business:

6220 SW 28 ST
MIAMI, FL 33155

New Principal Place of Business:

5505 NW 7TH STREET
APT. W119
MIAMI, FL 33126

Current Mailing Address:

6220 SW 28 ST
MIAMI, FL 33155

New Mailing Address:

5505 NW 7TH STREET
APT. W119
MIAMI, FL 33126

FEI Number: 27-0063695

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PENA, EUDE J
6220 SW 28 ST
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

PENA, EUDE J
5505 NW 7TH STREET
APT. W119
MIAMI, FL 33126 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: EUDE J. PENA

01/12/2005

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: DPT () Delete
Name: PENA, EUDE J
Address: 6220 SW 28 ST
City-St-Zip: MIAMI, FL 33155

Title: DV () Delete
Name: GARCIA, MANUEL O
Address: 6220 SW 28 ST
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: PENA, EUDE J
Address: 5505 NW 7TH STREET - APT. W119
City-St-Zip: MIAMI, FL 33126

Title: DV (X) Change () Addition
Name: GARCIA, MANUEL O
Address: 5505 NW 7TH STREET-APT.W119
City-St-Zip: MIAMI, FL 33126

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: MANUEL O. GARCIA

VP

01/12/2005

Electronic Signature of Signing Officer or Director

Date