2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000089404

Name:

Address: City-St-Zip: LETULLE, BRIAN K

108 NE 13 AVENUE

POMPANO BEACH, FL 33060 US

FILED Feb 23, 2006 Secretary of State

Entity Nan	ie: SOUTH	I ATLANTI	IC CONTRACTORS, II	NC.			
Current Principal Place of Business:				New Principal Place of Business:			
113 S. CYF POMPANC	PRESS RD. BEACH, FL	_ 33060	US		2101 NW 33RD ST 2800 A POMPANO BEACH, FL	33069	US
Current Mailing Address:					New Mailing Address:		
113 S. CYF POMPANC	PRESS RD. BEACH, FL	_ 33060	US		2101 NW 33RD ST 2800 A POMPANO BEACH, FL	33069	US
FEI Number:	56-2388665	FEI Nu	mber Applied For ()	FEI Nun	nber Not Applicable ()	Certific	ate of Status Desired (X)
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
WILLIAM GREENE ASSOCIATES, PA 11450 WEST SAMPLE ROAD CORAL SPRINGS, FL 33065 US				CANNATELLI, EDWARD D PRES 10855 NW 9TH MANOR CORAL SPRINGS, FL 33071 US			
The above in the State		y submits	this statement for the p	ourpose o	f changing its registered	office or	registered agent, or both,
SIGNATURE: EDWARD D CANNATELLI					02/23/2006		
Election Carr	e with s. 607.	193(2)(b), F. ing Trust Fu	ture of Registered Age S., the corporation did no und Contribution ().		•	S TO OF	Date FICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	P (CANNATELLI 10855 NW 91 CORAL SPRI	TH MANOR			Title: (Name: Address: City-St-Zip:) Change	() Addition
Title: Name: Address: City-St-Zip:	VP (DIAMOND, S 108 NE 13 AV POMPANO B	√ENUE	33060 US		Title: (Name: Address: City-St-Zip:) Change	() Addition
Title:	SEC (() Delete			Title: () Change	() Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: EDWARD D CANNATELLI **PRES** 02/23/2006