2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000090814

Entity Name: ABC AFFORDABLE BUILDING CONTRACTORS, INC.

FILED Oct 24, 2008 Secretary of State

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

1 CORPORATE DR SUITE 1A 17 OLD KINGS ROAD PALM COAST, FL 32137

SUITE M

PALM COAST, FL 32137

Current Mailing Address: New Mailing Address:

1 CORPORATE DR SUITE 1A PO BOX 353669

PALM COAST, FL 32137 PALM COAST, FL 32137

FEI Number: 20-0147995 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SALAAM, BIBI A SALAAM, BIBI A 1 CORPÓRATE DR SUITE 1A 17 OLD KINGS ROAD

PALM COAST, FL 32137 SUITE M PALM COAST, FL 32137 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: BIBI A. SALAAM 10/24/2008

> 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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SALAAM, BIBI A SALAAM, BIBI A Name: Name:

1 CORPORATE DR SUITE 1A 17 OLD KINGS ROAD, SUITE M Address: Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: PALM COAST, FL 32137

Title: VΡ Title: VΡ (X) Change () Addition () Delete Name: SALAAM, MATTHEW B Name: SALAAM, MATTHEW B

1 CORPORATE DR SUITE 1A 17 OLD KINGS ROAD, SUITE M Address: Address: PALM COAST, FL 32137 PALM COAST, FL 32137 City-St-Zip: City-St-Zip:

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

SALAAM, MOHAMED B Name: SALAAM, MOHAMED B Name: 1 CORPORATE DR SUITE 1A 17 OLD KINGS ROAD, SUITE M Address: Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: PALM COAST, FL 32137

I hereby certify that the information supplied with this filing does not qualify 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: BIBI A. SALAAM ST 10/24/2008