## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000112532

FILED Feb 10, 2006 Secretary of State

Entity Nar	me: PERSON	AL TOUCH HOMES, INC.					
Current Principal Place of Business:				New Principal Place of Business:			
	ONIAL DRIVE A, FL 34231						
Current Mailing Address:				New Mailing Address:			
	ONIAL DRIVE A, FL 34231						
FEI Number: 65-0983579 FEI Number Applied For ( ) FEI			FEI Num	umber Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
6515 COLO SARASOT	JOSSO, LEON, ONIAL DRIVE A, FL 34231	US	nurnece of	changing it	re registers	od office or registered agent, or both	
	named entity s ∋ of Florida.	submits this statement for the	purpose or	changing ii	s registere	ed office or registered agent, or both,	
SIGNATUR	RE: BY E.S. C	AVILA AS ATTORNEY-IN-FA	ACT				
Electronic Signature of Registered Agent				Date			
		3(2)(b), F.S., the corporation did no	ot receive th	e prior notice	е.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () SANTOSUOSSO 6515 COLONIA SARASOTA, FL	L DRIVE		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	6515 COL	() Change (X) Addition SSO, ANNE M DNIAL DRIVE A, FL 34231	
Title: Name: Address: City-St-Zip:	( )	Delete		Title: Name: Address: City-St-Zip:	6515 COL	( ) Change (X) Addition DSSO, SCOTT DNIAL DRIVE A, FL 34231	

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: BY E.S. DAVILA AS ATTORNEY-IN-FACT 02/10/2006 D