

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000123583

Entity Name: ALPHA PAINTER'S INC.

FILED  
Oct 18, 2004  
Secretary of State

## Current Principal Place of Business:

3639 LATE MORNING CIRCLE  
KISSIMMEE, FL 34744 US

## Current Mailing Address:

3639 LATE MORNING CIRCLE  
KISSIMMEE, FL 34744 US

## New Principal Place of Business:

5232 CURRY FORD RD  
#407  
ORLANDO, FL 32812 US

## New Mailing Address:

5232 CURRY FORD RD  
APT# 407  
ORLANDO, FL 32812 US

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

## Name and Address of Current Registered Agent:

ARACELIS, RODRIGUEZ MRS.  
3639 LATE MORNING CIRCLE  
KISSIMMEE, FL 34744 US

## Name and Address of New Registered Agent:

ARACELIS, RODRIGUEZ MRS.  
5232 CURRY FORD RD  
APT# 407  
ORLANDO, FL 32812 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: JOEL RODRIGUEZ

10/18/2004

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  
Name: RODRIGUEZ, ARACELIS MRS.  
Address: 3639 LATE MORNING CIRCLE  
City-St-Zip: KISSIMMEE, FL 34744 US

Title: VP ( ) Delete  
Name: RODRIGUEZ, JOEL R SR.  
Address: 3639 LATE MORNING CIRCLE  
City-St-Zip: KISSIMMEE, FL 34744 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: RODRIGUEZ, ARACELIS MRS.  
Address: 5232 CURRY FORD APT #407  
City-St-Zip: ORLANDO, FL 32812 US

Title: VP (X) Change ( ) Addition  
Name: RODRIGUEZ, JOEL R SR.  
Address: 5232 CURRY FORD RD  
City-St-Zip: ORLANDO, FL 32812 US

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: JOEL RODRIGUEZ

VP

10/18/2004

Electronic Signature of Signing Officer or Director

Date