

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000134628

FILED
Nov 06, 2006
Secretary of State

Entity Name: JUAN CARLOS CONTRERAS, INC.

Current Principal Place of Business:

1900 W FINLAND DR
DELTONA, FL 32725

New Principal Place of Business:

1339 WHITEWOOD DR
DELTONA, FL 32725

Current Mailing Address:

1900 W FINLAND DR
DELTONA, FL 32725

New Mailing Address:

1339 WHITEWOOD DR
DELTONA, FL 32725

FEI Number: 52-2414318

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CONTRERAS, JUAN C
1900 W FINLAND DR
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

CONTRERAS, JUAN C
1339 WHITEWOOD DR
DELTONA, FL 32725 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: JUAN C CONTRERAS

11/06/2006

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: DP () Delete
Name: CONTRERAS, JUAN C
Address: 1900 W FINLAND DR
City-St-Zip: DELTONA, FL 32725

Title: DV () Delete
Name: CONTRERAS, SALVADOR
Address: 1900 W FINLAND DR
City-St-Zip: DELTONA, FL 32725

Title: SD () Delete
Name: MUNOZ, JOSE L
Address: 1037 E HANCOCK DR
City-St-Zip: DELTONA, FL 32725

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CONTRERAS, JUAN C
Address: 1339 WHITEWOOD DR
City-St-Zip: DELTONA, FL 32725

Title: DV (X) Change () Addition
Name: CONTRERAS, SALVADOR
Address: 1339 WHITEWOOD DR
City-St-Zip: DELTONA, FL 32725

Title: SD (X) Change () Addition
Name: MUNOZ, JOSE L
Address: 1339 WHITEWOOD DR
City-St-Zip: DELTONA, FL 32725

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: JUAN C CONTRERAS

DP

11/06/2006

Electronic Signature of Signing Officer or Director

Date