2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000134628

Entity Name: JUAN CARLOS CONTRERAS, INC.

FILED Nov 06, 2006 Secretary of State

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

1900 W FINLAND DR 1339 WHITEWOOD DR DELTONA, FL 32725 DELTONA, FL 32725

Current Mailing Address: New Mailing Address:

1900 W FINLAND DR 1339 WHITEWOOD DR DELTONA, FL 32725 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: Name and Address of New Registered Agent:

CONTRERAS, JUAN C CONTRERAS, JUAN C 1900 W FINLAND DR 1339 WHITEWOOD DR US US DELTONA, FL 32725 DELTONA, FL 32725

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 (). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CONTRERAS, JUAN C CONTRERAS, JUAN C Name: Name:

1900 W FINLAND DR 1339 WHITEWOOD DR Address: Address: City-St-Zip: DELTONA, FL 32725 City-St-Zip: DELTONA, FL 32725

Title: DV Title: (X) Change () Addition () Delete Name: CONTRERAS, SALVADOR Name: CONTRERAS, SALVADOR

1900 W FINLAND DR 1339 WHITEWOOD DR Address: Address: DELTONA, FL 32725 DELTONA, FL 32725 City-St-Zip: City-St-Zip:

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

MUNOZ, JOSE L MUNOZ, JOSE L Name: Name: 1037 E HANCOCK DR 1339 WHITEWOOD DR Address: Address: City-St-Zip: DELTONA, FL 32725 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