

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000010859

Entity Name: A. AVILES FRAMING, INC.

FILED  
Feb 18, 2006  
Secretary of State

## Current Principal Place of Business:

1068 GERONA AVENUE  
DELTONA, FL 32725

## New Principal Place of Business:

## Current Mailing Address:

1068 GERONA AVENUE  
DELTONA, FL 32725

## New Mailing Address:

FEI Number: 20-0488889

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AVILES, ANGELA  
1068 GERONA AVENUE  
DELTONA, FL 32725 US

## Name and Address of New Registered Agent:

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: ANGELA M. AVILES

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: PD ( ) Delete  
Name: AVILES, ANGELA  
Address: 1068 GERONA AVENUE  
City-St-Zip: DELTONA, FL 32725

Title: VD ( ) Delete  
Name: AVILES, JACOB  
Address: 1068 GERONA AVENUE  
City-St-Zip: DELTONA, FL 32725

Title: S ( ) Delete  
Name: DE JESUS, ROBERT A  
Address: 1068 GERONA AVENUE  
City-St-Zip: DELTONA, FL 32725

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ANGELA M. AVILES

PD

02/18/2006

Electronic Signature of Signing Officer or Director

Date