

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000024054

Entity Name: OSVALDO ALFONSO, INC.

FILED
Sep 19, 2005
Secretary of State

Current Principal Place of Business:

16340 67TH CT N
LOXAHATCHEE, FL 33470

New Principal Place of Business:

13878 YORK COURT
WELLINGTON, FL 33414

Current Mailing Address:

16340 67TH CT N
LOXAHATCHEE, FL 33470

New Mailing Address:

13878 YORK COURT
WELLINGTON, FL 33414

FEI Number: 56-2434690

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALFONSO, OSVALDO
16340 67TH CT N
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

ALFONSO, OSVALDO
13878 YORK COURT
WELLINGTON, FL 33414 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: OSVALDO ALFONSO

09/19/2005

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: D () Delete
Name: ALFONSO, OSVALDO
Address: 16340 67TH CT N
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: OSVALDO ALFONSO

D

09/19/2005

Electronic Signature of Signing Officer or Director

Date