2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000024415

City-St-Zip:

FILED Nov 29, 2005 Secretary of State

Entity Na	me: DOWN H	IOME CONSTRUCTION IN	IC.				
Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:			
	ARRO DR SU D, FL 32819	ITE 106 B					
Current Mailing Address:			New Maili	ing Address:			
	ARRO DR SU D, FL 32819	ITE 106 B					
FEI Number	: 13-4220855	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()		
Name and	l Address of C	Current Registered Agent	: Name and	l Address of	New Registered Agent:		
	M, DUANE ERVALE DR TION, FL 347	47 US					
	e named entity e of Florida.	submits this statement for t	he purpose of changing	its registered	office or registered agent, or both,		
SIGNATU	RE: DUANES						
	Electror	nic Signature of Registered	Agent		Date		
		3(2)(b), F.S., the corporation d g Trust Fund Contribution ().	id not receive the prior notic	e.			
	S AND DIREC	- ` ` `	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CEO (SCHRAMM, DL 734 CENTERV CELEBRATION	ALE DR	Title: Name: Address: City-St-Zip:	CEO (. SCHRAMM, D 860 N ORANG ORLANDO, FI	SE AVE		
Title: Name: Address: City-St-Zip:	P (SCHRAMM, CA 734 CENTERV CELEBRATION	ALE DR	Title: Name: Address: City-St-Zip:	P (SCHRAMM, D 878 AUSTIN A AKRON, OH	WE		
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	VP (SCHRAMM, C 878 AUSTIN A AKRON, OH	V E		
Title: Name: Address:	()) Delete	Title: Name: Address:	SEC (PROVCHY, SI 860 N ORANE			

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.

City-St-Zip: ORLANDO, FL 32801

SIGNATURE:	DUANE SCHRAMM	CEO	11/29/2005
SIGNATURE:	DUANE SCHRAMM		11/29/2005