

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000028757

Entity Name: OAA REMODELING, INC.

FILED
Sep 30, 2005
Secretary of State

Current Principal Place of Business:

667 SABAL PALM CIRCLE
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

667 SABAL PALM CIRCLE
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

1650 FIDDLEWOOD COURT
CASSELBERRY, FL 32707 US

FEI Number: 20-0778757

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYORGA, AUGUST C
200 NORTH DENNING DRIVE
SUITE 5
WINTER PARK, FL 327893736 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: AUGUST C MAYORGA

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: P () Delete
Name: AGUILAR, RAMON O
Address: 667 SABAL PALM CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 327893736

Title: V () Delete
Name: AGUILAR, OMAR A
Address: 667 SABAL PALM CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: V () Delete
Name: AGUILAR, AMIRULIS
Address: 667 SABAL PALM CIRCLE
City-St-Zip: ALTAMONTES SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: AGUILAR, RAMON O
Address: 1650 FIDDLEWOOD COURT
City-St-Zip: CASSELBERRY, FL 32707 US

Title: V (X) Change () Addition
Name: AGUILAR, OMAR A
Address: 1650 FIDDLEWOOD COURT
City-St-Zip: CASSELBERRY, FL 32707

Title: V (X) Change () Addition
Name: AGUILAR, AMIRULIS
Address: 1650 FIDDLEWOOD COURT
City-St-Zip: CASSELBERRY, FL 32707 US

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: RAMON O AGUILAR

P

09/30/2005

Electronic Signature of Signing Officer or Director

Date