

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000032450

FILED  
Jan 12, 2006  
Secretary of State

Entity Name: COLUDO ORTIZ CARPENTRY INC.

## Current Principal Place of Business:

313 E CANFIELD ST  
AVON PARK, FL 33825 US

## New Principal Place of Business:

## Current Mailing Address:

313 E CANFIELD ST  
AVON PARK, FL 33825 US

## New Mailing Address:

FEI Number: 20-0752548

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ORTIZ, FELIPE  
313 E CANFIELD ST  
AVON PARK, FL 33825 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: FELIPE ORTIZ

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: ORTIZ, FELIPE  
Address: 313 E CANFIELD ST  
City-St-Zip: AVON PARK, FL 33825 US

Title: VP ( ) Delete  
Name: ORTIZ, RAFAEL  
Address: 313 E CANFIELD ST  
City-St-Zip: AVON PARK, FL 33825 US

Title: S ( ) Delete  
Name: ORTIZ, MARTIN  
Address: 313 E CANFIELD ST  
City-St-Zip: AVON PARK, FL 33825 US

## 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: FELIPE ORTIZ

Electronic Signature of Signing Officer or Director

PD

01/12/2006

Date