

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000036706

FILED  
Oct 26, 2006  
Secretary of State

Entity Name: TEXTURE & PAINTING DESIGN, CORP.

## Current Principal Place of Business:

609 NW 2 ST #4  
MIAMI, FL 33128

## New Principal Place of Business:

7660 HOOPER RD  
#31  
WEST PALM BCH, FL 33411

## Current Mailing Address:

609 NW 2 ST #4  
MIAMI, FL 33128

## New Mailing Address:

7660 HOOPER DR  
#31  
WEST PALM BCH, FL 33411

FEI Number: 20-0800766

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOVER, LUIS A  
609 NW 2 ST #4  
MIAMI, FL 33128 US

## Name and Address of New Registered Agent:

JOVER, LUIS A  
7660 HOOPER RD  
WEST PALM BCH, FL 33411 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: JOVER LUIS

10/26/2006

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: DP ( ) Delete  
Name: JOVER, LUIS A  
Address: 609 NW 2 ST #4  
City-St-Zip: MIAMI, FL 33128

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: JOVER, LUIS A  
Address: 7660 HOOPER RD #31  
City-St-Zip: WEST PALM BCH, FL 33128

Title: PRES ( ) Change (X) Addition  
Name: ULRIC, BAPTISTE  
Address: 7660 HOOPER RD #31  
City-St-Zip: WEST PALM BCH, FL 33411

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: JOVIR LUIS

DP

10/26/2006

Electronic Signature of Signing Officer or Director

Date