

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000082421

FILED
Nov 16, 2005
Secretary of State

Entity Name: DELGADO'S PAINTING II, INC

Current Principal Place of Business:

1335 WEST POINTE VILLAS BLVD
APT 202
WINTER GARDEN, FL 34787

New Principal Place of Business:

890 MARLENE DRIVE
OCOE, FL 34761

Current Mailing Address:

1335 WEST POINTE VILLAS BLVD
APT 202
WINTER GARDEN, FL 34787

New Mailing Address:

890 MARLENE DRIVE
OCOE, FL 34761

FEI Number: 20-1157143

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELGADO, ALEJANDRO
1441 WEST SPRING RIDGE
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

DELGADO, ALEJANDRO
1441 WEST SPRING RIDGE CIRCLE
WINTER GARDEN, FL 34787 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: ALEJANDRO DELGADO

11/16/2005

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: P () Delete
Name: DELGADO, EFRAIN
Address: 1335 WEST POINTE VILLAS BLVD, APT 202
City-St-Zip: WINTER GARDEN, FL 32787 US

Title: VP () Delete
Name: ORTEGA, JHONY A
Address: 1335 WEST POINTE VILLAS BLVD APT 202
City-St-Zip: WINTER GARDEN, FL 34787

Title: VP () Delete
Name: ORTEGA, LUIS C
Address: 1335 WEST POINTE VILLAS BLVD, APT 202
City-St-Zip: WINTER GARDEN, FL 31787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DELGADO, EFRAIN
Address: 890 MARLENE DRIVE
City-St-Zip: OCOEE, FL 34761 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: RIVERA, SANTIAGO S
Address: 890 MARLENE DRIVE
City-St-Zip: OCOEE, FL 34761

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: EFRAIN DELGADO

P

11/16/2005

Electronic Signature of Signing Officer or Director

Date