2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000096893

Entity Name: ALEX CUSTOM MADE DOORS CORP

FILED Nov 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6455 PERSHING ST 5565 SCHENCK AVE HOLLYWOOD, FL 330242036

SUITE 01

ROCKLEDGE, FL 32955

Current Mailing Address: New Mailing Address:

6455 PERSHING ST 4390 SEVILLE AVE HOLLYWOOD, FL 330242036 COCOA, FL 32926

FEI Number: 20-1305526 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RIVAS, ALEXANDRA RIVAS, ALEXANDRA 6455 PERSHING ST 4390 SEVILLE AVE HOLLYWOOD, FL 330242036 US US COCOA, FL 32926

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: ALEXANDRA RIVAS 11/28/2006

> 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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

RIVAS, ALEXANDRA RIVAS, ALEXANDRA Name: Name: 4390 SEVILLE AVE. 6455 PERSHING ST Address: Address: COCOA, FL 32926 City-St-Zip: HOLLYWOOD, FL 330242036 City-St-Zip:

Title: () Delete Title: (X) Change () Addition ROSABEL-RODRIGUEZ, ROLANDO ROSABEL-RODRIGUEZ, ROLANDO Name: Name:

4390 SEVILLE AVE. 6455 PERSHING ST Address: Address: HOLLYWOOD, FL 330242036 COCOA, FL 32926 City-St-Zip: 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: ALEXANDRA RIVAS OWNE 11/28/2006