

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000105311

Entity Name: CUSTOM AUTO LUX INC

FILED
Nov 13, 2007
Secretary of State

Current Principal Place of Business:

6568 BUENA VISTA DRIVE
MARGATE, FL 33063

New Principal Place of Business:

6574 N STATE ROAD 7
#392
COCONUT CREEK, FL 33073

Current Mailing Address:

6568 BUENA VISTA DR
MARGATE, FL 33063

New Mailing Address:

6574 N STATE ROAD 7
#392
COCONUT CREEK, FL 33073

FEI Number: 20-1378863

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIRALDO, RUBEN
6568 BUENA VISTA DRIVE
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

GIRALDO, ANA
8 NEWPORT AVE
DEERFIELD BEACH, FL 33442 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: ANA GIRALDO

11/13/2007

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: GIRALDO, RUBEN PRESIDE
Address: 6568 BUENA VISTA
City-St-Zip: MARGATE, FL 33063

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GIRALDO, ANA
Address: 8 NEWPORT AVE
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: S, D () Change (X) Addition
Name: GIRALDO, JULIANA
Address: 6568 BUENA VISTA DR
City-St-Zip: MARGATE, FL 33063

I hereby certify that the information supplied with this filing does not qualify 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: ANA GIRALDO

P

11/13/2007

Electronic Signature of Signing Officer or Director

Date