

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000113398

**FILED**  
**Oct 11, 2005**  
**Secretary of State**

**Entity Name:** CENTRAL FLORIDA INDUSTRIES, INC.

**Current Principal Place of Business:**

2121 VILLA DRIVE  
VALRICO, FL 33549

**New Principal Place of Business:**

2721 VILLA DRIVE  
VALRICO, FL 33549

**Current Mailing Address:**

2121 VILLA DRIVE  
VALRICO, FL 33549

**New Mailing Address:**

2721 VILLA DRIVE  
VALRICO, FL 33549

**FEI Number:** 20-1458396

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MONDA, AL F.  
2121 VILLA DRIVE  
VALRICO, FL 33549 US

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

MONDA, AL F.  
2721 VILLA DRIVE  
VALRICO, FL 33549 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: AL F. MONDA

10/11/2005

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: MONDA, AL F.  
Address: 2121 VILLA DRIVE  
City-St-Zip: VALRICO, FL 33549

Title: S ( ) Delete  
Name: MONDA, KRISTINE  
Address: 2121 VILLA DRIVE  
City-St-Zip: VALRICO, FL 33549

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MONDA, AL F.  
Address: 2721 VILLA DRIVE  
City-St-Zip: VALRICO, FL 33549

Title: S (X) Change ( ) Addition  
Name: MONDA, KRISTINE  
Address: 2721 VILLA DRIVE  
City-St-Zip: VALRICO, FL 33549

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: AL F. MONDA

P

10/11/2005

Electronic Signature of Signing Officer or Director

Date