2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000127377

Entity Name: A + FIRE EQUIPMENT, INC.

FILED Feb 13, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
CHITTANT Principal Place of Blicipace	NAW Principal Place of Kilsiness:

841 NW 35 CT 6860 SW 35 ST MIAMI, FL 33125 MIAMI, FL 33155

Current Mailing Address: New Mailing Address:

841 NW 35 CT 6860 SW 35 ST MIAMI, FL 33125 MIAMI, FL 33155

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

MUNOZ, ENRIQUETA CABRERA, HECTOR A 841 NW 35 CT 6860 SW 35 ST MIAMI, FL 33125 US MIAMI, FL 33155 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: HECTOR A CABRERA 02/13/2006

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

 Name:
 MUNOZ, ENRIQUETA
 Name:
 MUNOZ, ENRIQUETA

 Address:
 841 NW 35 CT
 Address:
 841 NW 35 CT

 Address:
 841 NW 35 CT
 Address:
 841 NW 35 CT

 City-St-Zip:
 MIAMI, FL 33125
 City-St-Zip:
 MIAMI, FL 33125

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

 Name:
 Name:
 CABRERA, HECTOR A

 Address:
 Address:
 6860 SW 35 ST

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33155

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: HECTOR A CABRERA DP 02/13/2006