

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000150976

Entity Name: ALUMCENTER INC.

FILED  
Sep 25, 2005  
Secretary of State

## Current Principal Place of Business:

13562 SW 99 TERRACE  
MIAMI, FL 33186

## New Principal Place of Business:

13275 SW 136 ST  
SUITE # 32  
MIAMI, FL 33186

## Current Mailing Address:

13562 SW 99 TERRACE  
MIAMI, FL 33186

## New Mailing Address:

13275 SW 136 ST  
SUITE # 32  
MIAMI, FL 33186

FEI Number: 20-1838111

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

COHEN, JUAN A  
9667 SW 138 AVE  
MIAMI, FL 33186 US

## Name and Address of New Registered Agent:

COHEN, JUAN A  
16296 SW 103 TERRACE  
MIAMI, FL 33196 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: JUAN A COHEN

09/25/2005

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: COHEN, JUAN A  
Address: 9667 SW 138 AVE  
City-St-Zip: MIAMI, FL 33186

Title: VP (X) Delete  
Name: COHEN, MARTIN A  
Address: 13562 SW 99 TERRACE  
City-St-Zip: MIAMI, FL 33186

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: COHEN, JUAN A  
Address: 16296 SW 103 TERRACE  
City-St-Zip: MIAMI, FL 33196

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

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: JUAN A COHEN

PRES

09/25/2005

Electronic Signature of Signing Officer or Director

Date