2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 18, 2005
Secretary of State

DOCUMENT# P04000151749

Entity Name: A.O.A. CONSTRUCTION INC

Current Principal Place of Business:

5205 12 AVENUE SOUTH
GULFPORT, FL 33707 US

New Principal Place of Business:

144 1/2 9TH AVENUE NE
ST. PETERSBURG, FL 33701 US

Current Mailing Address:

5205 12 AVENUE SOUTH
GULFPORT, FL 33707 US

New Mailing Address:

144 1/2 9TH AVENUE NE
ST. PETERSBURG, FL 33701 US

FEI Number: 20-1817896 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DIEZ PALAU, FELIX A SR
4125 W WATERS AVENUE
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

OLIVEIRA DE ALMEIDA, AROLDO
144 1/2 9TH AVENUE NE
ST. PETERSBURG, FL 33701 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: AROLDO OLIVEIRA DE ALMEIDA 10/18/2005
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: OLIVEIRA DE ALMEIDA, AROLDO
Address: 5205 12 AVENUE SOUTH
City-St-Zip: GULFPORT, FL 33707 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: OLIVEIRA DE ALMEIDA, AROLDO
Address: 144 1/2 9TH AVENUE NE
City-St-Zip: ST. PETERSBURG, FL 33701 US

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: AROLDO OLIVEIRA DE ALMEIDA P 10/18/2005
Electronic Signature of Signing Officer or Director Date