

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000160285

Entity Name: MA-JOS ENTERPRISES, INC.

FILED
Apr 18, 2006
Secretary of State

Current Principal Place of Business:

120 E MAGNOLIA COURT
APOPKA, FL 32703

New Principal Place of Business:

209 SOUTH AURORA DRIVE
APOPKA, FL 32703

Current Mailing Address:

120 E MAGNOLIA COURT
APOPKA, FL 32703

New Mailing Address:

209 SOUTH AURORA DRIVE
APOPKA, FL 32703

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTILLO, JOSE M
130 E MAGNOLIA COURT
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

PUELLO, MARIA C
209 SOUTH AURORA DRIVE
APOPKA, FL 32703 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: MARIA CRISTINA PUELLO

04/18/2006

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:

Title: P () Delete
Name: CASTILLO, JOSE M
Address: 120 E MAGNOLIA COURT
City-St-Zip: APOPKA, FL 32703

Title: V () Delete
Name: PUELLO, MARIA C
Address: 120 E MAGNOLIA COURT
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PUELLO, MARIA C
Address: 209 SOUTH AURORA DRIVE
City-St-Zip: APOPKA, FL 32703

Title: V (X) Change () Addition
Name: VILLAVICENCIO, ZORAIDA
Address: 209 SOUTH AURORA DRIVE
City-St-Zip: APOPKA, FL 32703

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: MARIA CRISTINA PUELLO

PRES

04/18/2006

Electronic Signature of Signing Officer or Director

Date