2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 02, 2005
Secretary of State

DOCUMENT# P04000160551

Entity Name: CLASSIC HOME IMPROVEMENT SOLUTION, INC.

Current Principal Place of Business:

1648 CARIBOU HUNT TRAIL
ORLANDO, FL 32824 US

New Principal Place of Business:

1901 GRIFF WOOD COURT
ST. CLOUD, FL 34772 US

Current Mailing Address:

1648 CARIBOU HUNT TRAIL
ORLANDO, FL 32824 US

New Mailing Address:

1901 GRIFF WOOD COURT
ST. CLOUD, FL 34772 US

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

Name and Address of Current Registered Agent:

ORDONEZ, ALFREDO
1648 CARIBOU HUNT TRAIL
ORLANDO, FL 32824 US

Name and Address of New Registered Agent:

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: ALFREDO ORDONEZ
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: ORDONEZ, ALFREDO
Address: 1648 CARIBOU HUNT TRAIL
City-St-Zip: ORLANDO, FL 32824 US

Title: VP ( ) Delete
Name: JIMENEZ, CESAR P
Address: 1901 GRIFF WOOD CT.
City-St-Zip: ST. CLOUD, FL 34772 US

Title: S ( ) Delete
Name: ORDONEZ, ALFREDO
Address: 1648 CARIBOU HUNT TRAIL
City-St-Zip: ORLANDO, FL 32824 US

Title: T ( ) Delete
Name: JIMENEZ, CESAR P
Address: 1901 GRIFF WOOD CT.
City-St-Zip: ST. CLOUD, FL 34772 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: CESAR JIMENEZ VP 12/02/2005
Electronic Signature of Signing Officer or Director Date