

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000171314

Entity Name: A-CENTURY 1 HOME INSPECTION INC

FILED
Oct 05, 2005
Secretary of State

Current Principal Place of Business:

14411 COMMERCE WAY #305
MIAMI LAKES, FL 33014

New Principal Place of Business:

14411 COMMERCE WAY #305
MIAMI LAKES, FL 33016

Current Mailing Address:

14411 COMMERCE WAY #305
MIAMI LAKES, FL 33014

New Mailing Address:

14411 COMMERCE WAY #305
MIAMI LAKES, FL 33016

FEI Number: 55-0888287

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RECALDE, RUBEN D
14411 COMMERCE WAY #305
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

RECALDE, RUBEN D
14411 COMMERCE WAY #305
MIAMI LAKES, FL 33016 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: RUBEN D. RECALDE

10/05/2005

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: PT () Delete
Name: RECALDE, RUBEN D
Address: 14411 COMMERCE WAY #305
City-St-Zip: MIAMI LAKES, FL 33014

Title: S () Delete
Name: RECALDE, ALBIS R
Address: 14411 COMMERCE WAY #305
City-St-Zip: MIAMI LAKES, FL 33014

Title: V (X) Delete
Name: DIETSCH, CARLOS A
Address: 14411 COMMERCE WAY #305
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: RECALDE, RUBEN D
Address: 14411 COMMERCE WAY #305
City-St-Zip: MIAMI LAKES, FL 33016

Title: S (X) Change () Addition
Name: RECALDE, ALBIS R
Address: 14411 COMMERCE WAY #305
City-St-Zip: MIAMI LAKES, FL 33016

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: RUBEN D. RECALDE

PTD

10/05/2005

Electronic Signature of Signing Officer or Director

Date