2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 01, 2009
Secretary of State

DOCUMENT# P05000005058

Entity Name: VILLAFUERTE STUCCO INC

Current Principal Place of Business:

1412 WHISPERING WOODS WAY
DELAND, FL 32724

New Principal Place of Business:

155 SOUTH VIRGINIA AVE
DELAND, FL 32724

Current Mailing Address:

1412 WHISPERING WOODS WAY
DELAND, FL 32724

New Mailing Address:

155 SOUTH VIRGINIA AVE
DELAND, FL 32724

FEI Number: 20-2270696 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VILLAFUERTE, FERNANDO
1412 WHISPERING WOODS WAY
DELAND, FL 32724 US

Name and Address of New Registered Agent:

VILLAFUERTE, FERNANDO
155 SOUTH VIRGINIA AVE
DELAND, FL 32724 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: FERNANDO VILLAFUERTE 12/01/2009
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: PD ( ) Delete
Name: VILLAFUERTE, FERNANDO
Address: 1412 WHISPERING WOODS WAY
City-St-Zip: DELAND, FL 32724

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: VILLAFUERTE, FERNANDO
Address: 155 SOUTH VIRGINIA AVE
City-St-Zip: DELAND, FL 32724

Title: S ( ) Change (X) Addition
Name: VILLAFUERTE, FERNANDO
Address: 155 SOUTH VIRGINIA AVE
City-St-Zip: DELAND, FL 32724

I hereby certify that the information supplied with this filing does not qualify 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: FERNANDO VILLAFUERTE P 12/01/2009
Electronic Signature of Signing Officer or Director Date