

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000009169

Entity Name: ALL-SCAPES CONSTRUCTION, INC.

FILED
Oct 11, 2006
Secretary of State

Current Principal Place of Business:

11323 PHILLIPS PARKWAY DRIVE EAST SUITE 1
JACKSONVILLE, FL 32256

New Principal Place of Business:

14749 BULOW CREEK DR
JACKSONVILLE, FL 32258

Current Mailing Address:

11323 PHILLIPS PARKWAY DRIVE EAST SUITE 1
JACKSONVILLE, FL 32256

New Mailing Address:

14749 BULOW CREEK DR
JACKSONVILLE, FL 32258

FEI Number: 11-3740009

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

CLAUSS, CHANCE
14749 BULOW CREEK DR
JACKSONVILLE, FL 32258 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: CHANCE CLAUSS

10/11/2006

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: PD () Delete
Name: CLAUSS, CHANCE
Address: 11323 PHILLIPS PARKWAY DRIVE EAST SUITE 1
City-St-Zip: JACKSONVILLE, FL 32256

Title: V (X) Delete
Name: HOPPER, RICK
Address: 11323 PHILLIPS PARKWAY DRIVE EAST SUITE 1
City-St-Zip: JACKSONVILLE, FL 32256

Title: ST (X) Delete
Name: CLAUSS, HARRY
Address: 11323 PHILLIPS PARKWAY DRIVE EAST SUITE 1
City-St-Zip: JACKSONVILLE, FL 32256

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:

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: CHANCE CLAUSS

PD

10/11/2006

Electronic Signature of Signing Officer or Director

Date