

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000026882

FILED
Sep 18, 2006
Secretary of State

Entity Name: PETER CAVALIERE SERVICES, INC.

Current Principal Place of Business:

29 WESTFALLS LANE
PALM COAST, FL 32164

New Principal Place of Business:

125 LARAMIE DRIVE
PALM COAST, FL 32137

Current Mailing Address:

29 WESTFALLS LANE
PALM COAST, FL 32164

New Mailing Address:

125 LARAMIE DRIVE
PALM COAST, FL 32137

FEI Number: 04-3808820

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CAVALIERE, PETER
29 WESTFALLS LANE
PALM COAST, FL 32164 US

Name and Address of New Registered Agent:

CAVALIERE, PETER
125 LARAMIE DRIVE
PALM COAST, FL 32137 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: PETER CAVALIERE

09/18/2006

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: PETER, CAVALIERE
Address: 125 LARAMIE DRIVE
City-St-Zip: PALM COAST, FL 32137 US

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: PETER CAVALIERE

PRES

09/18/2006

Electronic Signature of Signing Officer or Director

Date