2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000027748

Entity Name: CUSTOM GRANITE DREAMS INC

FILED Oct 11, 2006 Secretary of State

6012 ANTILLA DR 360 W GRANT ST

UNIT B ORLANDO, FL 32809

ORLANDO, FL 32806

Current Mailing Address: New Mailing Address:

360 W GRANT ST 6012 ANTILLA DR ORLANDO, FL 32809

UNIT B

ORLANDO, FL 32806

FEI Number: 20-2386830 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SELPA, WILFREDO SELPA, WILFREDO P 177 HEATHER LYNN DR 177 HEATHER LYNN DR DAVENPORT, FL 33897 US DAVENPORT, FL 33897 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: WILFREDO SELPA 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

SELPA, WILFREDO SELPA, WILFREDO Name: Name: 177HEATHER LYNN DR 177 HEATHER LYNN DR Address: Address: City-St-Zip: DAVENPORT, FL 33897 City-St-Zip: DAVENPORT, FL 33897

Title: VΡ Title: VΡ (X) Change () Addition () Delete REYES, WILFREDO Name: Name: REYES, WILFREDO

6108 ANTILLA DR 6012 ANTILLA DR Address: Address: ORLANDO, FL 32809 US ORLANDO, FL 32809 US City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change () Addition ARBELO, RICHARD Name: Name:

322 PACHECO CT Address: Address: City-St-Zip: OCOEE, FL 34761 City-St-Zip:

Title: () Delete Title: () Change (X) Addition

MATOS, NINOSHKA M M Name: Name: Address: Address: 177 HEATHER LYNN DR City-St-Zip: City-St-Zip: DAVENPORT, FL 33897

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.

Ρ SIGNATURE: WILFREDO SELPA 10/11/2006