2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000030582

Entity Name: ARDOVINI & ASSOCIATES, INC.

FILED Nov 29, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

324 W. HICKORY STREET 2915 NE KIRKLAND RD. ARCADIA, FL 34266 US PALM BAY, FL 32905 US

Current Mailing Address: New Mailing Address:

324 W. HICKORY STREET 2915 NE KIRKLAND RD. ARCADIA, FL 34266 US PALM BAY, FL 32905

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

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

ARDOVINI, ENZO
324 W. HICKORY STREET
ARCADIA, FL 34266 US
ARDOVINI, ENZO
2915 NE KIRKLAND RD.
PALM BAY, FL 32905 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: ENZO ARDOVINI 11/29/2006

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

 Name:
 ARDOVINI, CARLO
 Name:
 ARDOVINI, ENZO

 Address:
 324 W. HICKORY STREET
 Address:
 2915 NE KIRKLAND RD.

 City-St-Zip:
 ARCADIA, FL 34266 US
 City-St-Zip:
 PALM BAY, FL 32905 US

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

 Name:
 ARDOVINI, ENZO
 Name:
 ARDOVINI, CARLO

 Address:
 324 W. HICKORY STREET
 Address:
 2915 NE. KIRKLAND RD

 City-St-Zip:
 ARCADIA, FL 34266 US
 City-St-Zip:
 PALM BAY, FL 32905

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: ENZO ARDOVINI P 11/29/2006