2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000111185

City-St-Zip:

APOPKA, FL 32712

FILED Feb 06, 2007 Secretary of State

Entity Na	me: VARELA	FRAMING INC			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1291 MONTEAGLE CIR APOPKA, 32712			1291 MONTEAGLE CII APOPKA, FL 32712	1291 MONTEAGLE CIR APOPKA, FL 32712	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
1291 MON APOPKA,	ITEAGLE CIR 32712		1291 MONTEAGLE CII APOPKA, FL 32712	R	
FEI Number	: 20-3288987	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
BLANCO PROFESSIONAL SERVICES INC 385 E MAIN ST APOPKA, FL 32703 US			VARELA, EDI FRANCI 1291 MONTEAGLE CII APOPKA, FL 32712	VARELA, EDI FRANCISCO 1291 MONTEAGLE CIRCLE APOPKA, FL 32712 US	
	e named entity e of Florida.	submits this statement for the p	urpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: EDI FRANCISCO VARELA				02/06/2007	
	Electro	nic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (VARELA, EDI 1291 MONTEA APOPKA, FL 3	GLE CIR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (SILVA, GONZA 1291 MONTEA APOPKA, FL 3	GLE CIR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D (RIVERA, URBII 1291 MONTEA		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: EDI FRANCISCO VARELA **PRES** 02/06/2007