2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000036063

Entity Name: JACKSONVILLE LOCKSMITH, INC

Current Principal Place of Business:	**New Principal Place of Business:**
932 BONNAPARTE LANDING CT JACKSONVILLE, FL 32218	1633 S. UNIVERSITY DR PLANTATION, FL 33324

Current Mailing Address:	**New Mailing Address:**
1633 S. UNIVERSITY DR PLANTATION, FL 33324	

FEI Number: 20-4842553   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
OTO LOCKSMITH, INC 1633 S. UNIVERSITY DR PLANTATION, FL 33324 US	OSHIK AMIGA M 1633 S. UNIVERSITY DR PLANTATION, FL 33324 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: OA _____   12/04/2007 _____
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:

OFFICERS AND DIRECTORS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: VP ( ) Delete	Title: VP (X) Change ( ) Addition
Name: OTO LOCKSMITH, INC,	Name: AMIGA, OSHIK M P
Address: 11050 MINNEAPOLIS DR	Address: 11050 MINNEAPOLIS DR
City-St-Zip: COOPER CITY, FL 33324	City-St-Zip: COOPER CITY, FL 33324

I hereby certify that the information supplied with this filing does not qualify 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: OA _____ P _____ 12/04/2007 _____
Electronic Signature of Signing Officer or Director   Date