2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000048133

FILED Nov 30, 2007 Secretary of State

Entity Nam	ie: EXCLU	SIVE STONE MASONS INC.					-
Current Principal Place of Business:				New Principal Place of Business:			
310 16TH AVE NW NAPLES, FL 34120				3201 ORANGE GROVE TRAIL NAPLES, FL 34120			
Current Mailing Address:				New Mailing Address:			
310 16TH AVE NW NAPLES, FL 34120				3201 ORANGE GROVE TRAIL NAPLES, FL 34120 US			
FEI Number:	20-4716275	FEI Number Applied For()	FEI Nur	nber Not Appli	cable ()	Certificate of Sta	atus Desired (X)
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
PUENTE, J. 310 16TH A NAPLES, F	VE NW	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: JAHAZIEL PUENTE							
Electronic Signature of Registered Agent						Date	_
		193(2)(b), F.S., the corporation did no ing Trust Fund Contribution ().	ot receive t	he prior notice	.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	PUENTE, JAI 310 16TH AV NAPLES, FL	E. NW		Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	GUADALUPE, R 3201 ORANGE NAPLES, FL 34	GROVE TRAIL 4120 US Change (X) Additi ZIEL NW	

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: JAHAZIEL PUENTE VP 11/30/2007