2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000104133

City-St-Zip: MIAMI, FL 33169 US

FILED Mar 12, 2008 Secretary of State

Entity Name: CASTRILLO HOME SERVICE, INC.						
Current Pr	incipal Place	of Business:	New Princ	New Principal Place of Business:		
1170 HONE MIAMI, FL	EY HILL DRIVE 33169					
Current Ma	ailing Address	s:	New Maili	New Mailing Address:		
1170 HONEY HILL DRIVE MIAMI, FL 33169 US				1170 HONEY HILL DRIVE MIAMI, FL 33169		
FEI Number:	13-4340889	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
ONE EAST SUITE 609	V OFFICES, P BROWARD B DERDALE, FL	LVD.	1170 HON	JACKSON, JAMES C 1170 HONEY HILL DRIVE MIAMI, FL 33169 US		
The above in the State		ubmits this statement for the po	urpose of changing i	ts registered	office or registered agent, or both,	
SIGNATURE: JAMES C. JACKSON				03/12/2008		
	Electroni	c Signature of Registered Age	nt		Date	
		(2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notic	e.		
OFFICERS	AND DIRECT	ORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () JACKSON, JAMI 1170 HONEY HI MIAMI, FL 3316	L DRIVE	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () JACKSON, JAMI 1170 HONEY HI MIAMI, FL 3316	L DRIVE	Title: Name: Address: City-St-Zip:	VP (, CASTRILLO, , 1170 HONEY MIAMI, FL 33	HILL DRIVE	
Title: Name: Address: City-St-Zip:	SEC. () JACKSON, JAMI 1170 HONEY HI MIAMI, FL 3316	L DRIVE	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address:	TR. () JACKSON, JAMI 1170 HONEY HI		Title: Name: Address:	() Change ()Addition	

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.

City-St-Zip:

SIGNATURE: JAMES C. JACKSON PRES 03/12/2008