## 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000115432

Entity Name: ALPHA LIPSTHER AUTO CARE CENTER, CORP.

FILED Sep 20, 2007 Secretary of State

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

10 NW 40TH CT 10 N.W. 40TH COURT OAKLAND, FL 33309 US

Current Mailing Address: New Mailing Address:

10 NW 40TH CT 10 N.W. 40TH COURT OAKLAND, FL 33309 US

FEI Number: 20-5502749 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:

TAX HOUSE CORPORATION

1261 E SAMPLE RD

POMPANO BEACH, FL 33064 US

DA SILVA FEITAL, ROGERIO

1244 N.W. 1ST AVENUE

FORT LAUDERDALE, FL 33311 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: ROGERIO DA SILVA FEITAL 09/20/2007

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:

Title: P ( ) Delete
Name: DE SILVA FEITAL, ROGERIO

Address: 10 NW 40TH CT City-St-Zip: OAKLAND, FL 33309

 Title:
 VP
 (X) Delete

 Name:
 ORELLANA, JULIO D

 Address:
 10 NW 40TH CT

 City-St-Zip:
 OAKLAND, FL 33309

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DA SILVA FEITAL, ROGERIO
Address: 1244 N.W. 1ST AVENUE

City-St-Zip: FORT LAUDERDALE, FL 33311 US

Title: ( ) Change ( ) Addition

Name: Address: City-St-Zip:

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: ROGERIO DA SILVA FEITAL PD 09/20/2007