2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000154748

Entity Name: UNIVERSAL HOME BUILDERS, INC.

FILED Oct 26, 2009 Secretary of State

Current Princi	pal Place of Business:	New Principal Place of Business

2550 WEST COLONIAL DRIVE 8800 BUENA VISTA PLACE

414 11202

ORLANDO, FL 32804 WINDERMERE, FL 34786

Current Mailing Address: New Mailing Address:

2550 WEST COLONIAL DRIVE 8800 BUENA VISTA PLACE

11202

ORLANDO, FL 32804 WINDERMERE, FL 34786

FEI Number: 20-8438263 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

LOUIS, JACQUELIN LOUIS, JACQUELIN 10914 MYSTIC POINT 8800 BUENA VISTA PLACE

#204 11202 ORLANDO, FL 32836 US WINDERMERE, FL 34786 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: JACQUELIN LOUIS

10/26/2009

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:

Title: () Delete Title: (X) Change () Addition

TORRES, ANGEL TORRES, ANGEL Name: Name: 2550 WEST COLONIAL DRIVE STE. 414 929 WESSON DR Address: Address:

City-St-Zip: ORLANDO, FL 32804 City-St-Zip: CASSELBERRY, FL 32707

SD Title: SD Title: () Delete (X) Change () Addition LOUIS, JACQUELIN LOUIS, JACQUELIN Name: Name:

10914 MYSTIC POINT 8800 BUENA VISTA PLACE 11202 Address: Address: ORLANDO, FL 32836 WINDERMERE, FL 34786 City-St-Zip: City-St-Zip:

Title: Title: ADM () Delete () Change () Addition

DISLA, BENITO Name: Name: 5655 GRAND CANYON DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32810 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: JACQUELIN LOUIS SD 10/26/2009