

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000039665

Entity Name: A I D CONSTRUCTION INC

FILED  
Mar 12, 2009  
Secretary of State

**Current Principal Place of Business:**

1413 NORTH AKRON DR  
UNIT C  
LEESBURG, FL 34748

**New Principal Place of Business:**

**Current Mailing Address:**

1413 NORTH AKRON DR  
UNIT C  
LEESBURG, FL 34748

**New Mailing Address:**

FEI Number: 20-8794087

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DELEON, AMAURI  
1413 NORTH AKRON DR  
UNIT C  
LEESBURG, FL 34748 US

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

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: AMAURI DELEON

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: PRES ( ) Delete  
Name: DELEON, AMAURI  
Address: 1413 NORTH AKRON DR, UNIT C  
City-St-Zip: LEESBURG, FL 34748

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: AMAURI DELEON

Electronic Signature of Signing Officer or Director

PRES

03/12/2009

Date