1000069999

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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: CONSTRUCTION AND HOME IMPROVEMENT BUILDING AMERICA INC (Name of Corporation)			
DOCUMENT NUMBER: P07000069999			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
RODRIGUEZ TALI (Name of Contact Person)			
CONSTRACTION AND HOME IMPROVEMENT BUILDING AMERICA INC (Firm/Company)			
2262 NW 20TH STREET (Address)			
MIAMI/FL 33142 (City/State and Zip Code)			
For further information concerning this matter, please call:			
RODRIGUEZ TALI (Name of Contact Person) at (305) 7425290 (Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Amendment Section Street Address: Amendment Section			

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (8/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nnge is submitted for a corporation	organized under the laws of the State of FLORIDA registered agent, or both, in the State of Florida.	
	the corporation: CONSTRUCTIOn office address: 1799 NW 28 ST	N AND HOME IMPROVEMENT BUILDING AMERICA INC MIAMI, FL 33142-1819	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 6/11/2007	Document number: P07 000069999	
•	d street address of the current register rtment of State:	ered agent and registered office on file with the	
	SWISSA SHLOMO		
	1799 NW 28ST	L 12 PHASSE	
	MIAMI FL 33142-1819	EFO 3	
SWISSA SHLOMO 1799 NW 28ST MIAMI FL 33142-1819 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
	RODRIGUEZ TALI		
2262 NW 20TH ST			
	(P.O. Box NOT acc	ceptable)	
The street addr as changed wil	ess of its registered office and the l be identical.	street address of the business office of its registered agent,	
Such change w authorized by t	as authorized by resolution duly a he board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.	
Sle	le	. SHLOMO SWISSA	
	ure of an officer or director)	(Printed or typed name and title)	
I further agree of my duties, an document is be	to comply with the provisions of a nd I am familiar with and accept to	ent and agree to act in this capacity. Il statutes relative to the proper and complete performance he obligation of my position as registered agent. Or, if this e in the registered office address, I hereby confirm that the hange.	
		7/10/2007	
(5	gnature of Registered Agent)	(Date)	
If signing on be	ehalf of an entity:		
	Typed or Printed Name)		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
MAIL (8/05)

* * * FILING FEE: \$35.00 * * *