

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000085650

Entity Name: SCA WOODWORKS INC

FILED
Oct 05, 2009
Secretary of State

Current Principal Place of Business:

4344 NW 9TH AVE BLDG 11
1C MAILBOX 171
POMPANO BEACH, FL 33064

New Principal Place of Business:

3842 CORAL TREE CIR
COCONUT CREEK, FL 33073

Current Mailing Address:

4344 NW 9TH AVE BLDG 11
1C MAILBOX 171
POMPANO BEACH, FL 33064

New Mailing Address:

3842 CORAL TREE CIR
COCONUT CREEK, FL 33073

FEI Number: 83-0489593

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVES, SIDENILSON C
4344 NW 9TH AVE BLDG 11
1C MAILBOX 171
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

ALVES, SIDENILSON C
3842 CORAL TREE CIR
COCONUT CREEK, FL 33073 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: SIDENILSON C ALVES

10/05/2009

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:

Title: PDS () Delete
Name: ALVES, SIDENILSON C
Address: 4344 NW 9TH AVE BLDG 11- 1C - MAILBOX 171
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change () Addition
Name: ALVES, SIDENILSON C
Address: 3842 CORAL TREE CIR
City-St-Zip: COCONUT CREEK, FL 33073

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: SIDENILSON C ALVES

PDS

10/05/2009

Electronic Signature of Signing Officer or Director

Date