

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000053903

Entity Name: XSIDING & ALUMINUM, INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

6777 HWY 77
CHIPLEY, FL 32428

New Principal Place of Business:

6439 ZINNIA DR
PANAMA CITY, FL 32404

Current Mailing Address:

6777 HWY 77
CHIPLEY, FL 32428

New Mailing Address:

6439 ZINNIA DR
PANAMA CITY, FL 32404

FEI Number: 59-3511660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMILUK, ROBERT A
6777 HWY 77
CHIPLEY, FL 32428 US

Name and Address of New Registered Agent:

SIMILUK, ROBERT A
6439 ZINNIA DR
PANAMA CITY, FL 32404 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: ROBERT A SIMILUK

03/24/2009

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: VSTD () Delete
Name: SIMILUK, TRACY L
Address: 677 HWY 77
City-St-Zip: CHIPLEY, FL 32428

Title: PD () Delete
Name: SIMILUK, ROBERT A
Address: 6777 HWY 77
City-St-Zip: CHIPLEY, FL 32428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: SIMILUK, TRACY L
Address: 6439 ZINNIA DR
City-St-Zip: PANAMA CITY, FL 32404

Title: PSTD (X) Change () Addition
Name: SIMILUK, ROBERT A
Address: 6439 ZINNIA DR
City-St-Zip: PANAMA CITY, FL 32404

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: ROBERT A SIMILUK

PTSD

03/24/2009

Electronic Signature of Signing Officer or Director

Date