

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000102293

FILED
Dec 19, 2005
Secretary of State

Entity Name: FLEXABLE PROPERTY MANAGEMENT, INC.

Current Principal Place of Business:

2121 NW 139 STREET
OPA LOCKA, FL 33054

New Principal Place of Business:

4442 NW 203RD STREET
OPA LOCKA, FL 33055

Current Mailing Address:

4442 NW 203RD STREET
OPA-LOCKA, FL 33055

New Mailing Address:

FEI Number: 65-0964747 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMATHERS, TIMOTHY
4442 NW 203RD ST.
OPA-LOCKA, FL 33055 US

Name and Address of New Registered Agent:

SMATHERS, TIMOTHY A SR.
4442 NW 203RD ST.
OPA-LOCKA, FL 33055 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: TIMOTHY A. SMATHERS SR.

12/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMATHERS, TIMOTHY A
Address: 442 NW 103RD STREET
City-St-Zip: OPA LOCKA, FL 33055

Title: V () Delete
Name: BOSWELL, RAYMOND
Address: 2121 NW 139 ST BAY 12
City-St-Zip: OPA LOCKA, FL 33054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMATHERS, TIMOTHY A SR.
Address: 442 NW 103RD STREET
City-St-Zip: OPA LOCKA, FL 33055

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TIMOTHY A. SMATHERS SR.

P

12/19/2005

Electronic Signature of Signing Officer or Director

Date