

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# V53944

FILED
Sep 29, 2006
Secretary of State

Entity Name: ROY VALDES CONTRACTING SERVICES, INC.

Current Principal Place of Business:

7815 SW 118 ST
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

7815 SW 118 ST
MIAMI, FL 33156

New Mailing Address:

FEI Number: 65-0347482

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDES, ROY
7815 SW 118 ST
MIAMI, FL 33156 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: ROY VALDES

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: PD () Delete
Name: VALDES, ROY,
Address: 7815 SW 118 ST
City-St-Zip: MIAMI, FL 33156

Title: VSD () Delete
Name: VALDES, ROSA,
Address: 7815 SW 118 STREET
City-St-Zip: MIAMI, FL 33156

Title: VD () Delete
Name: PEREZ, LEONIDES
Address: 7815 SW 118 ST
City-St-Zip: MIAMI, FL 33156

Title: VD () Delete
Name: DEL LLANO, ARMANDO JR
Address: 7815 S.W. 118 ST
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: ROY VALDES

PD

09/29/2006

Electronic Signature of Signing Officer or Director

Date