

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000055798

FILED
Nov 27, 2007
Secretary of State

Entity Name: PREFERRED INSTALLATION GROUP INC.

Current Principal Place of Business:

328 NEW YORK AVENUE
SAINT CLOUD, FL 34769 US

New Principal Place of Business:

Current Mailing Address:

328 NEW YORK AVENUE
SAINT CLOUD, FL 34769 US

New Mailing Address:

FEI Number: 33-1116210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
92 SADBERRY ROAD
QUINCY, FL 32351 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: MELISSA OSANI

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: D, P () Delete
Name: COOK, MICHAEL
Address: 328 NEW YORK AVE
City-St-Zip: SAINT CLOUD, FL 34769 US

Title: D,VP () Delete
Name: COOK, MAUREEN
Address: 328 NEW YORK AVE
City-St-Zip: SAINT CLOUD, FL 34769 US

Title: S () Delete
Name: COOK, MELISSA
Address: 328 NEW YORK AVE
City-St-Zip: SAINT CLOUD, FL 34769 US

Title: T () Delete
Name: COOK, JENNIFER
Address: 328 NEW YORK AVE
City-St-Zip: SAINT CLOUD, FL 34769 US

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 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: MAUREEN COOK

Electronic Signature of Signing Officer or Director

DVP

11/27/2007

Date