

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F02000000350

Entity Name: LEONARD'S DRAPERIES, INC.

**FILED**  
**Apr 08, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

10411 RHODE ISLAND AVENUE  
BELTSVILLE, MD 20705

**New Principal Place of Business:**

**Current Mailing Address:**

10411 RHODE ISLAND AVENUE  
BELTSVILLE, MD 20705

**New Mailing Address:**

FEI Number: 54-0756573

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: C.T.CORPORATION

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: MARKS, JAY  
Address: 20512 RIGGS HILL WAY  
City-St-Zip: BROOKEVILLE, MD 20833

Title: V  
Name: TAYLOR, ROBERT F  
Address: 17715 SAINT AGNES WAY  
City-St-Zip: OLNEY, MD 20832

Title: P  
Name: MARKS, WILMA  
Address: 3400 SAYLOR PLACE  
City-St-Zip: ALEXANDRIA, VA 22304

Title: T  
Name: TAYLOR, BETH  
Address: 17715 SE AGNES LN.  
City-St-Zip: OLNEY, MD 20832

I hereby 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 all other like empowered.

SIGNATURE: GLORIA E. BOWLES

BK

04/08/2011

Electronic Signature of Signing Officer or Director

Date