

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# L50223

Entity Name: JAIBA CABINETS, INC.

FILED
Nov 18, 2009
Secretary of State

Current Principal Place of Business:

7815 WEST 20TH AVENUE
HIALEAH, FL 33014

New Principal Place of Business:

Current Mailing Address:

15980 SW 4TH STREET
PEMBROKE PINES, FL 33027

New Mailing Address:

7815 WEST 20TH AVENUE
HIALEAH, FL 33014

FEI Number: 65-0171358

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PENA, ANTONIO R
15980 SW 4TH STREET
PEMBROKE PINES, FL 33027 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: ANTONIO PENA

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: PENA, ANTONIO R
Address: 15980 SW 4 STREET
City-St-Zip: PEMBROKE PINES, FL 33027

Title: SD () Delete
Name: JIMENEZ, ANA L
Address: 15980 SW 4 STREET
City-St-Zip: PEMBROKE PINES, FL 33027

Title: VT () Delete
Name: PENA, PEDRO A
Address: 7815 WEST 20TH AVENUE
City-St-Zip: HIALEAH, FL 33014

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:

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: ANTONIO PENA

Electronic Signature of Signing Officer or Director

PRES

11/18/2009

Date