

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000018792

FILED  
Sep 21, 2005  
Secretary of State

Entity Name: EUROTUX THE CABINET SHOPPE INC.

## Current Principal Place of Business:

26600 OLD MUSE RD.  
LABELLE, FL 33935

## New Principal Place of Business:

721 N. BRIDGE STREET  
LABELLE, FL 33935

## Current Mailing Address:

26600 OLD MUSE RD.  
LABELLE, FL 33935

## New Mailing Address:

1451 NOBLES AVENUE  
LABELLE, FL 33935

FEI Number: 65-0988545

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHEPPARD, PETER  
26600 OLD MUSE RD.  
LABELLE, FL 33935 US

## Name and Address of New Registered Agent:

SHEPPARD, PETER  
1451 NOBLES AVENUE  
LABELLE, FL 33935 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: PETER C SHEPPARD

09/21/2005

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: SHEPPARD, PETER  
Address: 26600 OLD MUSE RD.  
City-St-Zip: LABELLE, FL 33935

Title: D ( ) Delete  
Name: SHEPPARD, D G  
Address: 26600 OLD MUSE RD.  
City-St-Zip: LABELLE, FL 33935

Title: VP ( ) Delete  
Name: STOCKWILL, EARL PETER  
Address: 26600 OLD MUSE RD.  
City-St-Zip: LABELLE, FL 33935

Title: SD ( ) Delete  
Name: BILBS, ANGEL  
Address: 1000 SUMMERALL ROAD  
City-St-Zip: LABELLE, FL 33935

Title: D ( ) Delete  
Name: PEREZ, RICHARD  
Address: 1000 SUMMERALL RD.  
City-St-Zip: LABELLE, FL 33935

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SHEPPARD, PETER  
Address: 1451 NOBLES AVENUE  
City-St-Zip: LABELLE, FL 33935

Title: D (X) Change ( ) Addition  
Name: SHEPPARD, D G  
Address: 1451 NOBLES AVE  
City-St-Zip: LABELLE, FL 33935

Title: VP (X) Change ( ) Addition  
Name: STOCKWILL, EARL PETER  
Address: 1000 SUMMERALL ROAD  
City-St-Zip: LABELLE, FL 33935

Title: SD (X) Change ( ) Addition  
Name: BILES, ANGEL  
Address: 1000 SUMMERALL ROAD  
City-St-Zip: LABELLE, FL 33935

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: PETER C SHEPPARD

PD

09/21/2005

Electronic Signature of Signing Officer or Director

Date