

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000105368

Entity Name: DREAM CABINETS COMPANY, INC.

FILED  
Jan 13, 2009  
Secretary of State

## Current Principal Place of Business:

3150 TALL PINES DR.  
LARGO, FL 33771

## New Principal Place of Business:

2150 TALL PINES DR.  
LARGO, FL 33771

## Current Mailing Address:

3150 TALL PINES DR.  
LARGO, FL 33771

## New Mailing Address:

2150 TALL PINES DR.  
LARGO, FL 33771

FEI Number: 59-3684822

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MONIKA, SMAGA  
19817 GULF BLVD  
#202  
INDIAN ROCKS BEACH, FL 33785 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: MONIKA SMAGA

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 ( ) Delete  
Name: SMAGA, MONIKA  
Address: 19817 GULF BLVD #202  
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: D ( ) Delete  
Name: SMAGA, ZBIGNIEW  
Address: 19817 GULF BLVD #202  
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MONIKA SMAGA

D

01/13/2009

Electronic Signature of Signing Officer or Director

Date