

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000047206

Entity Name: DENT CRAFT U.S.A. INC.

FILED
Oct 17, 2006
Secretary of State

Current Principal Place of Business:

906 RIVER RAPIDS AVENUE
BRANDON, FL 33511

New Principal Place of Business:

760 YOUNG LANE
WINCHESTER, TN 37398

Current Mailing Address:

906 RIVER RAPIDS AVENUE
BRANDON, FL 33511

New Mailing Address:

760 YOUNG LANE
WINCHESTER, TN 37398

FEI Number: 59-3721289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINES, VADEN
906 RIVER RAPIDS AVE
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

HINES, VADEN
1107 ORANGEWALK
BRANDON, FL 33511 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: VADEN HINES

10/17/2006

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: PSD () Delete
Name: HINES, VADEN B
Address: 906 RIVER RAPIDS AVENUE
City-St-Zip: BRANDON, FL 33511

Title: VTD () Delete
Name: HINES, KRISTIN K
Address: 906 RIVER RAPIDS AVENUE
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: HINES, VADEN B
Address: 760 YOUNG LANE
City-St-Zip: WINCHESTER, TN 37398

Title: VTD (X) Change () Addition
Name: HINES, KRISTIN K
Address: 760 YOUNG LANE
City-St-Zip: WINCHESTER, TN 37398

I hereby certify that the information supplied with this filing does not qualify for the 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: KRISTIN K HINES

VP

10/17/2006

Electronic Signature of Signing Officer or Director

Date