2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000020383

Entity Name: ACCESS CABINET CONCEPTS, INC.

FILED Jan 29, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

1505 FORT CLARKE 5816 SW ARCHER RD.

5-306 LOT 25

GAINESVILLE, FL 32606 US GAINESVILLE, FL 32608 US

Current Mailing Address: New Mailing Address:

1505 FORT CLARKE 5816 SW ARCHER RD.

5-306 LOT 25

GAINESVILLE, FL 32606 US GAINESVILLE, FL 32608 US

FEI Number: 04-3620955 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MAHON, TIMOTHY K

2929 EAST COMMERCIAL BLVD.

5816 SW ARCHER RD.

PENTHOUSE E LOT 25

FORT LAUDERDALE, FL 33308 US GAINESVILLE, FL 32608 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: MARIO HEBERT 01/29/2009

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: () Delete Title: (X) Change () Addition HEBERT, MARIO HEBERT, MARIO PRES. Name: Name: 1505 FORT CLARKE 5-306 5816 SW ARCHER RD., LOT 25 Address: Address: City-St-Zip: GAINESVILLE, FL 32606 US City-St-Zip: GAINESVILLE, FL 32608 US

Title: SV () Delete Title: () Change () Addition

 Name:
 DUBE, CARL
 Name:

 Address:
 3499 N.W. 97TH BOULEVARD SUITE 4
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32606
 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: MARIO HEBERT PRES 01/29/2009