

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000089416

FILED
Nov 20, 2006
Secretary of State

Entity Name: S.K.G. ENTERPRISES AND ESTATES CORPORATION

Current Principal Place of Business:

8740 CRESTGATE CIRCLE
ORLANDO, FL 32819

New Principal Place of Business:

4700 MILLENIA BLVD
175
ORLANDO, FL 32839

Current Mailing Address:

8740 CRESTGATE CIRCLE
ORLANDO, FL 32819

New Mailing Address:

4700 MILLENIA BLVD
ORLANDO, FL 32839

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAMBLE, KIETTA
8740 CRESTGATE CIRCLE
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

GAMBLE, KIETTA
8740 4700 MILLENIA
ORLANDO, FL 32839 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: KIETTA GAMBLE

11/20/2006

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: CEO () Delete
Name: GAMBLE, SAMMY III
Address: 8740 CRESTGATE CIRCLE
City-St-Zip: ORLANDO, FL 32819

Title: P () Delete
Name: GAMBLE, KIETTA
Address: 8740 CRESTGATE CIRCLE
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: GAMBLE, SAMMY III
Address: 4700 MILLENIA BLVD
City-St-Zip: ORLANDO, FL 32839

Title: P (X) Change () Addition
Name: GAMBLE, KIETTA
Address: 4700 MILLENIA BLVD
City-St-Zip: ORLANDO, FL 32839

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: KIETTA GAMBLE

P

11/20/2006

Electronic Signature of Signing Officer or Director

Date