

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000027994

FILED
Nov 18, 2005
Secretary of State

Entity Name: HGN INTERIOR CARPENTRY TRIM, CORP.

Current Principal Place of Business:

3107 NW 4TH AVE #4
POMPANO BCH, FL 33064

New Principal Place of Business:

4031 NE 4TH AVE
DEERFIELD BEACH, FL 33064

Current Mailing Address:

3107 NW 4TH AVE #4
POMPANO BCH, FL 33064

New Mailing Address:

4031 NE 4TH AVE
DEERFIELD BEACH, FL 33064

FEI Number: 48-1303153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKROK, HEMERSON B
3107 NW 4TH AVE #4
POMPANO BCH, FL 33064 US

Name and Address of New Registered Agent:

SKROK, HEMERSON B
4031 NE 4TH AVE
DEERFIELD BEACH, FL 33064 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: HEMERSON B. SKROK

11/18/2005

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: DPVT () Delete
Name: SKROK, HEMERSON B
Address: 3107 NW 4TH AVE #4
City-St-Zip: POMPANO BCH, FL 33064

Title: S (X) Delete
Name: SKROK, HEMERSON B
Address: 3107 NW 4TH AVE #4
City-St-Zip: POMPANO BCH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: SKROK, HEMERSON B
Address: 4031 NE 4TH AVE
City-St-Zip: DEERFIELD BEACH, FL 33064

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 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: HEMERSON SKROK

PDS

11/18/2005

Electronic Signature of Signing Officer or Director

Date