

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000112939

FILED
Nov 02, 2006
Secretary of State

Entity Name: CARPETS WITH LOVE, INC.

Current Principal Place of Business:

413 WATERWAY LANE
FT. WALTON BEACH, FL 32547

New Principal Place of Business:

428 HERITAGE WAY
FT. WALTON BEACH, FL 32547

Current Mailing Address:

413 WATERWAY LANE
FT. WALTON BEACH, FL 32547

New Mailing Address:

P O BOX 1916
FT. WALTON BEACH, FL 32549

FEI Number: 30-0218485 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VAUGHN, RAY
101 POQUITO ROAD UNIT A
SHALIMAR, FL 32579 US

Name and Address of New Registered Agent:

SADE, FRANK P
428 HERITAGE WAY
FT WALTON BEACH, FL 32547 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: FRANK P SADE

11/02/2006

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: P () Delete
Name: SADE, FRANK
Address: 413 WATERWAY LANE
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: VP () Delete
Name: CASTLE, FRED
Address: #2 DEHTON
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: S () Delete
Name: WETZEER, TODD
Address: PLAYGROUND INN 156
City-St-Zip: FT. WALTON BEACH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SADE, FRANK P
Address: 428 HERITAGE WAY
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: S (X) Change () Addition
Name: SADE, FRANK P
Address: 428 HERITAGE WAY
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: T (X) Change () Addition
Name: SADE, FRANK P
Address: 428 HERITAGE WAY
City-St-Zip: FT. WALTON BEACH, FL 32547

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: FRANK P SADE

P

11/02/2006

Electronic Signature of Signing Officer or Director

Date