

**2005 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Jan 12, 2005  
Secretary of State**

DOCUMENT# P03000121310

Entity Name: S & M CABINET INSTALLATIONS INC.

**Current Principal Place of Business:**

2743 AEIN ROAD  
ORLANDO, FL 32817 US

**New Principal Place of Business:**

**Current Mailing Address:**

2743 AEIN ROAD  
ORLANDO, FL 32817 US

**New Mailing Address:**

FEI Number: 20-0344440      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BROWN, TAMI  
4350 LAROSA AVENUE  
NORTH PORT, FL 34286 US

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

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: TAMI BROWN

\_\_\_\_\_  
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: DP ( ) Delete  
Name: MYERS, MICHAEL  
Address: 2743 AEIN ROAD  
City-St-Zip: ORLANDO, FL 32817 US

Title: DVP ( ) Delete  
Name: MYERS, STELLA  
Address: 2743 AEIN ROAD  
City-St-Zip: ORLANDO, FL 32817 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL MYERS

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DP

01/12/2005

\_\_\_\_\_  
Date