

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000124025

FILED
Oct 12, 2009
Secretary of State

Entity Name: TONY'S CARPET SALES & INSTALLATION INC.

Current Principal Place of Business:

6636 CORAL COVE DR
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

6636 CORAL COVE DR
ORLANDO, FL 32818

New Mailing Address:

FEI Number: 59-3638635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAILEY, TREVOR
625 E COLONIAL DR, STE 203
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

JAN S CONSULTANT INC
4436 RALEIGH ST
ORLANDO, FL 32811 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: JAN MCCRAY

10/12/2009

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: PT () Delete
Name: GAY, ANTHONY
Address: 6636 CORAL COVE DR
City-St-Zip: ORLANDO, FL 32818

Title: V () Delete
Name: GAY, PATRICE
Address: 6636 CORAL COVE DR
City-St-Zip: ORLANDO, FL 32818

Title: S (X) Delete
Name: MITCHELL, LANCE
Address: 6636 CORAL COVE DRIVE
City-St-Zip: ORLANDO, FL 32818

Title: S (X) Delete
Name: MCFADDEN JR, ALLEN
Address: 6636 CORAL COVE DRIVE
City-St-Zip: ORLANDO, FL 32818

Title: S (X) Delete
Name: PRICE, MARC
Address: 614104 RED OAK CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: S (X) Delete
Name: GOSS, REGINALD
Address: 806 CARLSON STREET
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: PATRICE GAY

V

10/12/2009

Electronic Signature of Signing Officer or Director

Date