

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000124567

Entity Name: KALIDO'S INTERIOR DESIGN, CORP.

FILED
Sep 18, 2007
Secretary of State

Current Principal Place of Business:

7041 ENVIRON BLVDAPT 430
LAUDERHILL, FL 33319

New Principal Place of Business:

4741 VILLAGE WAY
DAVIE, FL 33314

Current Mailing Address:

7041 ENVIRON BLVDAPT 430
LAUDERHILL, FL 33319

New Mailing Address:

4741 VILLAGE WAY
DAVIE, FL 33314

FEI Number: 20-0404117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, VICTORIA ESQ
2100 PONCE DE LEON BLVD STE 600
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

GOMEZ, HILDA
4741 VILLAGE WAY
DAVIE, FL 33314 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: GOMEZ HILDA

09/18/2007

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: PTSD () Delete
Name: GOMEZ, HILDA
Address: 3327 LAKE SIDE DR
City-St-Zip: DAVIE, FL 33328

Title: V () Delete
Name: GOMEZ, HILDA
Address: 3327 LAKESIDE DR
City-St-Zip: DAVIE, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: GOMEZ, HILDA
Address: 4741 VILLAGE WAY
City-St-Zip: DAVIE, FL 33314

Title: V (X) Change () Addition
Name: GOMEZ, HILDA
Address: 4741 VILLAGE WAY
City-St-Zip: DAVIE, FL 33314

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: GOMEZ HILDA

PTSD

09/18/2007

Electronic Signature of Signing Officer or Director

Date