

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000129288

Entity Name: COSTACOL CABINETS INC

FILED
Feb 19, 2008
Secretary of State

Current Principal Place of Business:

670 MADRID DR
KISSIMMEE, FL 34758 US

New Principal Place of Business:

727 HAWK LN
KISSIMMEE, FL 34759 US

Current Mailing Address:

670 MADRID DR
KISSIMMEE, FL 34758 US

New Mailing Address:

727 HAWK LN
KISSIMMEE, FL 34759 US

FEI Number: 20-0407517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUAREZ, ALEXANDER
670 MADRID DR
KISSIMMEE, FL 34758 US

Name and Address of New Registered Agent:

SUAREZ, ALEXANDER
727 HAWK LN
KISSIMMEE, FL 34758 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: ALEXANDER SUAREZ

02/19/2008

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: SUAREZ, ALEXANDER
Address: 670 MADRID DR
City-St-Zip: KISSIMMEE, FL 34758 US

Title: VP () Delete
Name: SUAREZ, XIOMARA M
Address: 670 MADRID DR
City-St-Zip: KISSIMMEE, FL 34758 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SUAREZ, ALEXANDER
Address: 727 HAWK LN
City-St-Zip: KISSIMMEE, FL 34759 US

Title: VP (X) Change () Addition
Name: SUAREZ, XIOMARA M
Address: 727 HAWK LN
City-St-Zip: KISSIMMEE, FL 34759 US

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: ALEXANDER SUAREZ

P

02/19/2008

Electronic Signature of Signing Officer or Director

Date