

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000144360

FILED
Jun 02, 2009
Secretary of State

Entity Name: OLIVER'S REPAIR & KITCHEN INSTALLATION INC.

Current Principal Place of Business:

5308 CORONET DR
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

5308 CORONET DR
JACKSONVILLE, FL 32205

New Mailing Address:

FEI Number: 45-0527736

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLIVER, ROBERT W
5308 CORONET DR
JACKSONVILLE, FL 32205 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: ROBERT W OLIVER

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: OLIVER, ROBERT W
Address: 5308 CORONET DR
City-St-Zip: JACKSONVILLE, FL 32205

Title: VP () Delete
Name: OLIVER JR, ROBERT W VP
Address: 5308 CORONET DR
City-St-Zip: JAX, FL 32205 DU

Title: TRE () Delete
Name: OLIVER, SHIRLEY A SEC,TRE
Address: 5308 CORONET DR
City-St-Zip: JAX, FL 32205 DU

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:

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: ROBERT W OLIVER

Electronic Signature of Signing Officer or Director

PRES

06/02/2009

Date