

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000156058

Entity Name: MELVIN JONKMAN TRIM, INC.

FILED
Apr 11, 2007
Secretary of State

Current Principal Place of Business:

13608 LESLIE DR
HUDSON, FL 34667

New Principal Place of Business:

7334 NEW YORK AVENUE
HUDSON, FL 34667

Current Mailing Address:

13608 LESLIE DR
HUDSON, FL 34667

New Mailing Address:

7334 NEW YORK AVENUE
HUDSON, FL 34667

FEI Number: 20-0521134

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONKMAN, MELVIN
13608 LESLIE DR
HUDSON, FL 34667 US

Name and Address of New Registered Agent:

JONKMAN, MELVIN
7334 NEW YORK AVE
HUDSON, FL 34667 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: MELVIN JONKMAN

04/11/2007

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: D () Delete
Name: JONKMAN, MELVIN
Address: 13608 LESLIE DR
City-St-Zip: HUDSON, FL 34667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JONKMAN, MELVIN
Address: 7334 NEW YORK AVE
City-St-Zip: HUDSON, FL 34667

I hereby certify that the information supplied with this filing does not qualify for the 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: MELVIN JONKMAN

PRE

04/11/2007

Electronic Signature of Signing Officer or Director

Date