

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000156222

Entity Name: SDK CARPET, INC.

FILED  
Oct 29, 2008  
Secretary of State

## Current Principal Place of Business:

4085 NE 28 TERRACE  
OCALA, FL 34479

## New Principal Place of Business:

2901 SW 41ST STREET  
401  
OCALA, FL 34474

## Current Mailing Address:

4085 NE 28 TERRACE  
OCALA, FL 34479

## New Mailing Address:

2901 SW 41ST STREET  
APT 401  
OCALA, FL 34479

FEI Number: 55-0855989

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KASPER, JOHN  
4085 NE 28 TERRACE  
OCALA, FL 34479 US

## Name and Address of New Registered Agent:

KASPER, JOHN  
2901 SW 41ST STREET  
APT 401  
OCALA, FL 34479 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: JOHN KASPER

10/29/2008

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: DP ( ) Delete  
Name: KASPER, JOHN  
Address: 4085 NE 28 TERRACE  
City-St-Zip: OCALA, FL 34479

Title: T ( ) Delete  
Name: KASPER, DEBORAH  
Address: 4085 NE 28 TERRACE  
City-St-Zip: OCALA, FL 34479

Title: S ( ) Delete  
Name: KASPER, MELISSA  
Address: 4085 NE 28 TERRACE  
City-St-Zip: OCALA, FL 34479

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: KASPER, JOHN  
Address: 2901 W 41ST STREET  
City-St-Zip: OCALA, FL 34479

Title: T (X) Change ( ) Addition  
Name: KASPER, DEBORAH  
Address: 2901 SW 41ST STREET APT 401  
City-St-Zip: OCALA, FL 34474

Title: S (X) Change ( ) Addition  
Name: KASPER, MELISSA  
Address: 2901 SW 41ST STREET APT 401  
City-St-Zip: OCALA, FL 34474

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: JOHN KASPER

PRES

10/29/2008

Electronic Signature of Signing Officer or Director

Date