## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000157986

Entity Name: JOE'S PROFESSIONAL CARPET, INC.

FILED Jul 05, 2006 Secretary of State

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Current Principal Place of Business:			New Princi	New Principal Place of Business:	
1960 NW 187TH ST MIAMI, FL 33056				1380 NW 68 ST MIAMI, FL 33147	
Current Mailing Address:			New Mailir	New Mailing Address:	
2220 RUTLAND STREET OPA LOCKA, FL 33054				1380 NW 68 ST MIAMI, FL 33147	
FEI Number: 51-0495140 FEI Number Applied For ( ) FEI Nu			El Number Not Appli	mber Not Applicable ( ) Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:	
8100 N UN SUITE 102	RG, BARRY S IIVERSITY DR RDALE, FL 3				
	named entity : of Florida.	submits this statement for the purp	oose of changing it	s registered office or registered agent, or both,	
SIGNATUR	RE: MITTELB	ERG BARRYS			
	Electror	nic Signature of Registered Agent		Date	
Election Car	npaign Financin	3(2)(b), F.S., the corporation did not re g Trust Fund Contribution ( ).	-		
	S AND DIREC			S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) MCEWAN, AST 1960 NW 187T MIAMI, FL 330	H ST	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition MCEWAN, ASTON 1380 NW 68 ST MIAMI, FL 33147	
Title: Name: Address: City-St-Zip:	PT (X QUATQANYA, \ 2220 RUTLANE OPA LOCKA, F	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V (X MCEWAN, AST 1960 NW 87TH MIAMI, FL 330	ST.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S (X WILLIAMS, RA 2220 RUTLAND OPA LOCKA, F	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	C (X CASMAY, EMM 17201 NW 43R MIAMI, FL 330	D COURT	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	M (X NEALY, TENIK 2460 NW 60TH MIAMI, FL 331	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ASTON MCEWAN D 07/05/2006