

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000012149

**Entity Name:** ACCENT PET STYLING, INC.

**FILED**  
**Mar 22, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

17940 TOLEDO BLADE, SUITE D  
PORT CHARLOTTE, FL 33948

**New Principal Place of Business:**

**Current Mailing Address:**

17940 TOLEDO BLADE, SUITE D  
PORT CHARLOTTE, FL 33948

**New Mailing Address:**

**FEI Number:** 88-0517475

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CAMPOS, ISABEL  
5564 VERACRUZ TERRACE  
PORT CHARLOTTE, FL 33981 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:** ISABEL CAMPOS

\_\_\_\_\_  
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:** PD  
**Name:** CAMPOS, ISABEL  
**Address:** 5564 VERACRUZ TERRACE  
**City-St-Zip:** PORT CHARLOTTE, FL 33981

**Title:** SD  
**Name:** CAMPOS, RENEE'  
**Address:** 5564 VERACRUZ TERRACE  
**City-St-Zip:** PORT CHARLOTTE, FL 33981

I hereby 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 all other like empowered.

**SIGNATURE:** ISABEL CAMPOS

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

03/22/2010

\_\_\_\_\_  
Date