

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000028407

FILED
Feb 07, 2007
Secretary of State

Entity Name: WOOD WORK & MORE ENTERPRISES, INC.

Current Principal Place of Business:

929 CLOVERLEAF BLVD
DELTONA, FL 32725

New Principal Place of Business:

688 WHITEMARSH AVE
DELTONA, FL 32725

Current Mailing Address:

929 CLOVERLEAF BLVD
DELTONA, FL 32725

New Mailing Address:

688 WHITEMARSH AVE.
DELTONA, FL 32725

FEI Number: 20-0725072

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALDONADO, LUIS E
929 CLOVERLEAF BLVD
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

MALDONADO, LUIS E
688 WHITEMARSH AVE
DELTONA, FL 32725 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: LUIS E MALDONADO

02/07/2007

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: P () Delete
Name: MALDONADO, LUIS E
Address: 929 CLOVERLEAF BLVD
City-St-Zip: DELTONA, FL 32725

Title: VP () Delete
Name: MALDONADO, YOLANDA E
Address: 929 CLOVERLEAF BLVD
City-St-Zip: DELTONA, FL 32725

Title: D () Delete
Name: CASTRO, JORGE
Address: 929 CLOVERLEAF BLVD
City-St-Zip: DELTONA, FL 32725

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MALDONADO, LUIS E
Address: 688 WHITEMARSH AVE
City-St-Zip: DELTONA, FL 32725

Title: VP (X) Change () Addition
Name: MALDONADO, YOLANDA E
Address: 688 WHITEMARSH AVE
City-St-Zip: DELTONA, FL 32725

Title: D (X) Change () Addition
Name: CASTRO, JORGE
Address: 688 WHITEMARSH AVE
City-St-Zip: DELTONA, FL 32725

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: LUIS MALDONADO

P

02/07/2007

Electronic Signature of Signing Officer or Director

Date