2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 30, 2007
Secretary of State

DOCUMENT# P04000051966

Entity Name: E Z CARPETING, INC.

Current Principal Place of Business:

1217 CASEDALE ST
LEHIGH ACRES, FL 33936

New Principal Place of Business:

Current Mailing Address:

1217 CASEDALE ST
LEHIGH ACRES, FL 33936

New Mailing Address:

FEI Number: 20-0915947 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAMPBELL, LEON A
1217 CASEDALE ST
LEHIGH ACRES, FL 33936 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: LEON A CAMPBELL
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 ( ) Delete
Name: CAMPBELL, LEON A
Address: 1217 CASEDALE ST
City-St-Zip: LEHIGH ACRES, FL 33936

Title: V ( ) Delete
Name: CAMPBELL, CAROLYN G
Address: 1217 CASEDALE ST
City-St-Zip: LEHIGH ACRES, FL 33936

Title: SEC. (X) Delete
Name: DARROUX, LAKQUON
Address: 1217 CASEDALE ST.
City-St-Zip: LEHIGH ACRES, FL 33936 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: LEON A CAMPBELL PD 10/30/2007
Electronic Signature of Signing Officer or Director Date