

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000097156

Entity Name: M & K PAINTING INCORPORATED

FILED
Mar 25, 2008
Secretary of State

Current Principal Place of Business:

PO BOX 82
SEFNER, FL 33510

New Principal Place of Business:

20419 PAINTER PLACE
SPRING HILL, FL 34610

Current Mailing Address:

PO BOX 82
SEFNER, FL 33510

New Mailing Address:

20419 PAINTER PLACE
SPRING HILL, FL 34610

FEI Number: 20-1424654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOKDAD, KIRIM SHERF
20419 PAINTER PLACE
SPRING HILL, FL 34610 US

Name and Address of New Registered Agent:

MOKDAD, KARIM SHERF
20419 PAINTER PLACE
SPRING HILL, FL 34610 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: KARIM MOKDAD

03/25/2008

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: PR () Delete
Name: MOKDAD, KARIM PRES.
Address: 904 SKYVIEW DRIVE
City-St-Zip: BRANDON, FL 33510

Title: VP () Delete
Name: KELLY, JOHN VP
Address: 904 SKYVIEW DRIVE
City-St-Zip: BRANDON, FL 33510

Title: CEO () Delete
Name: SCOTT, KATHERINE CEO
Address: 904 SKYVIEW DRIVE
City-St-Zip: BRANDON, FL 33510

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PR (X) Change () Addition
Name: MOKDAD, KARIM PRES.
Address: 20419 PAINTER PLACE
City-St-Zip: SPRING HILL, FL 34610

Title: VP (X) Change () Addition
Name: KELLY, JOHN VP
Address: 20419 PAINTER PLACE
City-St-Zip: SPRING HILL, FL 34610

Title: CEO (X) Change () Addition
Name: SCOTT, KATHERINE CEO
Address: 20419 PAINTER PLACE
City-St-Zip: SPRING HILL, FL 34610

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: KARIM MOKDAD

PRES

03/25/2008

Electronic Signature of Signing Officer or Director

Date