## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000100791

Entity Name: KUT N STYLZ INC.

Address:

City-St-Zip:

6639 SW 41 CT

**DAVIE, FL 33314** 

FILED Mar 10, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 973 NW 27TH AVENUE FORT LAUDERDALE, FL 33311 **Current Mailing Address: New Mailing Address:** 973 NW 27TH AVENUE FORT LAUDERDALE, FL 33311 FEI Number: 54-2157002 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCDONALD, SHANTEL 4770 N.W. 10TH COURT #204 PLANTATION, FL 33313 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: SHANTEL MCDONALD 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition MCDONALD, REGINALD Name: Name: 4770 N.W. 10TH COURT #204 Address: Address: City-St-Zip: PLANTATION, FL 33313 City-St-Zip: Title: COO () Delete Title: () Change () Addition MCDONALD, SHANTEL Name: Name: 4770 N.W. 10TH COURT #204 Address: Address: PLANTATION, FL 33313 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition MCDONALD, NEKEISHA Name: Name: 4770 N.W. 10TH COURT #204 Address: Address: City-St-Zip: PLANTATION, FL 33313 City-St-Zip: Title: () Delete Title: () Change () Addition MCDONALD, DAVION Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: DAVION MCDONALD	Т	03/10/2008
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