

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000105651

Entity Name: P.S.L. FLOORING, INC.

FILED
Nov 28, 2005
Secretary of State

Current Principal Place of Business:

930 GATLIN BLVD
PORT ST LUCIE, FL 34953

New Principal Place of Business:

906 GATLIN BLVD
PORT ST LUCIE, FL 34953

Current Mailing Address:

930 GATLIN BLVD
PORT ST LUCIE, FL 34953

New Mailing Address:

906 GATLIN BLVD
PORT ST LUCIE, FL 34953

FEI Number: 20-1440773

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNOWLES, JAMES B
930 GATLIN BLVD
PORT ST LUCIE, FL 34953 US

Name and Address of New Registered Agent:

KNOWLES, JAMES B
906 GATLIN BLVD
PORT ST LUCIE, FL 34953 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: JAMES KNOWLES

11/28/2005

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: KNOWLES, JAMES B
Address: 930 GATLIN BLVD
City-St-Zip: PORT ST LUCIE, FL 34953

Title: VD () Delete
Name: MITCHELTREE, ARTHUR C
Address: 930 GATLIN BLVD
City-St-Zip: PORT ST LUCIE, FL 34953

Title: SD () Delete
Name: MITCHELTREE, VANESSA Q
Address: 930 GATLIN BLVD
City-St-Zip: PORT ST LUCIE, FL 34953

Title: TD () Delete
Name: KNOWLES, LESLIE E
Address: 930 GATLIN BLVD
City-St-Zip: PORT ST LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KNOWLES, JAMES B
Address: 9 GATLIN BLVD
City-St-Zip: PORT ST LUCIE, FL 34953

Title: VD (X) Change () Addition
Name: MITCHELTREE, ARTHUR C
Address: 906 GATLIN BLVD
City-St-Zip: PORT ST LUCIE, FL 34953

Title: SD (X) Change () Addition
Name: MITCHELTREE, VANESSA Q
Address: 906 GATLIN BLVD
City-St-Zip: PORT ST LUCIE, FL 34953

Title: TD (X) Change () Addition
Name: KNOWLES, LESLIE E
Address: 906 GATLIN BLVD
City-St-Zip: PORT ST LUCIE, FL 34953

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES KNOWLES

PRES

11/28/2005

Electronic Signature of Signing Officer or Director

Date