

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000128531

Entity Name: L & G FLOORING, INC.

FILED
Nov 18, 2008
Secretary of State

Current Principal Place of Business:

3637 CENTRAL AVENUE
167
FT. MYERS, FL 33901 US

Current Mailing Address:

3637 CENTRAL AVENUE
167
FT. MYERS, FL 33901 US

FEI Number: 20-1646777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUIMARAES, LIOBERTO
3637 CENTRAL AVENUE
167
FT. MYERS, FL 33901 US

New Principal Place of Business:

9846 BERNWOOD PL
204
FT. MYERS, FL 33966 US

New Mailing Address:

9846 BERNWOOD PL
204
FT. MYERS, FL 33966 US

Name and Address of New Registered Agent:

GUIMARAES, LIOBERTO
9846 BERNWOOD PL
204
FT. MYERS, FL 33966 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: LIOBERTO GUIMARAES

11/18/2008

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: PD () Delete
Name: GUIMARAES, LIOBERTO
Address: 3637 CENTRAL AVENUE # 167
City-St-Zip: FT. MYERS, FL 33901

Title: VP () Delete
Name: DE OLIVEIRA, SIRLENE M
Address: 3637 CENTRAL AVENUE # 167
City-St-Zip: FT. MYERS, FL 33901

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GUIMARAES, LIOBERTO
Address: 9846 BERNWOOD PL 204
City-St-Zip: FT. MYERS, FL 33966

Title: VP (X) Change () Addition
Name: DE OLIVEIRA, SIRLENE M
Address: 9846 BERNWOOD PL 204
City-St-Zip: FT. MYERS, FL 33966

Title: D () Change (X) Addition
Name: SPRUNG, AMARILDO
Address: 9846 BERNWOOD PL 204
City-St-Zip: FORT MYERS, FL 33966 US

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: LIOBERTO GUIMARAES

PD

11/18/2008

Electronic Signature of Signing Officer or Director

Date