

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000045814

Entity Name: J & K WIRELATHING, INC.

FILED
Oct 23, 2006
Secretary of State

Current Principal Place of Business:

14108 SWEAT LOOP RD
WIMAUMA, FL 33598

New Principal Place of Business:

Current Mailing Address:

14108 SWEAT LOOP RD
WIMAUMA, FL 33598

New Mailing Address:

FEI Number: 52-2455434

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINK, KRISTI
9305 GERRY LANE
TAMPA, FL 33637 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: KRISTI WINK

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: D () Delete
Name: WINK, JAMES M
Address: PO BOX 214
City-St-Zip: BALM, FL 33503

Title: D () Delete
Name: WINK, KRISTI
Address: PO BOX 214
City-St-Zip: BALM, FL 33503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: KRISTI WINK

DR

10/23/2006

Electronic Signature of Signing Officer or Director

Date