2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Feb 15, 2009
Secretary of State

DOCUMENT# P05000108089

Entity Name: KING OF KINGS FLOORING, CORP.

Current Principal Place of Business:

128 SW PEACOCK BLVD., APT 207
PORT ST. LUCIE, FL 34986 US

New Principal Place of Business:

352 SW COCONUT KEY WAY
PORT SAINT LUCIE, FL 34986 US

Current Mailing Address:

128 SW PEACOCK BLVD., APT 207
PORT ST. LUCIE, FL 34986 US

New Mailing Address:

352 SW COCONUT KEY WAY
PORT SAINT LUCIE, FL 34986 US

FEI Number: 68-0612389 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DA SILVA, PAULO R
128 SW PEACOCK BLVD., APT 207
PORT ST LUCIE, FL 34986 US

Name and Address of New Registered Agent:

DA SILVA, PAULO R
352 SW COCONUT KEY WAY
PORT SAINT LUCIE, FL 34986 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: PAULO ROBERTO DA SILVA 02/15/2009
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: SILVA, PAULO R
Address: 1481 SW EDINBURGH DR
City-St-Zip: PORT ST. LUCIE, FL 34953 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SILVA, PAULO R
Address: 352 SW COCONUT KEY WAY
City-St-Zip: PORT SAINT LUCIE, FL 34986 US

Title: VPD ( ) Change (X) Addition
Name: DA SILVA, YVONNE
Address: 352 SW COCONUT KEY WAY
City-St-Zip: PORT SAINT LUCIE, FL 34986 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: PAULO ROBERTO DA SILVA PD 02/15/2009
Electronic Signature of Signing Officer or Director Date