

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000121045

Entity Name: ABEL'S FLOOR COVERING, INC.

FILED  
Dec 13, 2006  
Secretary of State

## Current Principal Place of Business:

4509 TINA LANE  
PLANT CITY, FL 33563

## New Principal Place of Business:

4504 ST RD 574 LOT 9  
PLANT CITY, FL 33563 US

## Current Mailing Address:

4509 TINA LANE  
PLANT CITY, FL 33563

## New Mailing Address:

4504 ST RD 574 LOT 9  
PLANT CITY, FL 33563 US

FEI Number: 20-3389931

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VAIL, LINDA A  
4205 NORTH WIND LANE  
TAMPA, FL 33624 US

## Name and Address of New Registered Agent:

VALLE, ABEL  
4504 ST RD 574 LOT 9  
PLANT CITY, FL 33563 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: ABEL VALLE

12/13/2006

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: P ( ) Delete  
Name: VALLE, ABEL C  
Address: 4509 TINA LANE  
City-St-Zip: PLANT CITY, FL 33563

Title: VP ( ) Delete  
Name: VALLE, JOSE A  
Address: 4509 TINA LANE  
City-St-Zip: PLANT CITY, FL 33563

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: VALLE, ABEL C  
Address: 4504 ST RD 574 LOT 9  
City-St-Zip: PLANT CITY, FL 33563 US

Title: VP (X) Change ( ) Addition  
Name: VALLE, JOSE A  
Address: 4504 ST RD 574 LOT 9  
City-St-Zip: PLANT CITY, FL 33563 US

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: ABEL VALLE

P

12/13/2006

Electronic Signature of Signing Officer or Director

Date