

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000121682

Entity Name: KASS & LEX, INC.

FILED
Nov 07, 2009
Secretary of State

Current Principal Place of Business:

6448 NW FOXGLOVE STREET
PORT ST LUCIE, FL 34986

New Principal Place of Business:

107 NORTH 11TH STREET
FORT PIERCE, FL 34950

Current Mailing Address:

PO BOX 882251
PORT ST LUCIE, FL 34988

New Mailing Address:

FEI Number: 25-1925966

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAM PETIT
6448 NW FOXGLOVE STREET
PORT ST LUCIE, FL 34986 US

Name and Address of New Registered Agent:

SHARINE NEPTUNE
107 NORTH 11TH STREET
FORT PIERCE, FL 34950 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: SHARINE NEPTUNE

11/07/2009

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: PETIT, WILLIAM I
Address: 6448 NW FOXGLOVE STREET
City-St-Zip: PORT ST LUCIE, FL 34986

Title: VS () Delete
Name: NEPTUNE, SHARINE
Address: 6448 NW FOXGLOVE STREET
City-St-Zip: PORT ST LUCIE, FL 34986

Title: T () Delete
Name: PETIT, KASSANDRA N
Address: 6448 NW FOXGLOVE STREET
City-St-Zip: PORT ST LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ACCIME, SILENIE
Address: 107 NORTH 11TH STREET
City-St-Zip: FORT PIERCE, FL 34950

Title: VS (X) Change () Addition
Name: MARLEY, JAH
Address: 107 NORTH 11TH STREET
City-St-Zip: FORT PIERCE, FL 34950

Title: T (X) Change () Addition
Name: ROZIER, TASHA
Address: 107 NORTH 11TH STREET
City-St-Zip: FORT PIERCE, FL 34950

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: SHARINE NEPTUNE

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11/07/2009

Electronic Signature of Signing Officer or Director

Date