

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000123601

FILED  
Sep 25, 2006  
Secretary of State

Entity Name: VIP KITCHEN CABINETS, CORP.

## Current Principal Place of Business:

1562 SE VILLAGE GREEN DR. , SUITE 15-16  
PORT ST. LUCIE, FL 34953 US

## New Principal Place of Business:

## Current Mailing Address:

1562 SE VILLAGE GREEN DR. , SUITE 15-16  
PORT ST. LUCIE, FL 34953 US

## New Mailing Address:

FEI Number: 20-3443451

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TAXPLACE, CORP.  
2721 S. US 1 SUITE 9  
FORT PIERCE, FL 34982 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: JOSE M RODRIGUES

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: NEMES, SANDOR  
Address: 672 SW KAYAK AV.  
City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: VPD (X) Delete  
Name: RODRIGUES, JOSE M  
Address: 919 GRAND RESERVE BLVD.  
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: D (X) Delete  
Name: ARAUJO, DEIVISON A  
Address: 2610 N. SERENITE CIRC.  
City-St-Zip: FORT PIERCE, FL 34981 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: RODRIGUES, JOSE M  
Address: 919 GRAND RESERVE BLVD  
City-St-Zip: PORT ST LUCIE, FL 34986 US

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: JOSE M RODRIGUES

Electronic Signature of Signing Officer or Director

P/D

09/25/2006

Date