## 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000125072

Entity Name: ENVY ERENTS AND PARTY SUPPLY, INC.

FILED Oct 11, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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126 RAINTREE WOODS TRAIL 414 N 5TH ST

PALATKA, FL 32177 PALATKA, FL 32177

Current Mailing Address: New Mailing Address:

126 RAINTREE WOODS TRAIL PO BOX 126

PALATKA, FL 32177 PALATKA, FL 32178

FEI Number: 20-3536036 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PALTRIDGE, VITA PALTRIDGE, VITA 126 RAINTREE WOODS TRAIL 414 N 5TH ST

PALATKA, FL 32177 US PALATKA, FL 32177 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: VITA PALTRIDGE 10/11/2006

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:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST () Delete Title: PST (X) Change () Addition

 Name:
 PALTRIDGE, VITA
 Name:
 PALTRIDGE, VITA

 Address:
 126 RAINTREE WOODS TRAIL
 Address:
 PO BOX 126

 City-St-Zip:
 PALATKA, FL 32177
 City-St-Zip:
 PALATKA, FL 32178

Title: ( ) Delete Title: VP ( ) Change (X) Addition

 Name:
 Name:
 CALKINS, NICOLE

 Address:
 Address:
 PO BOX 126

 City-St-Zip:
 City-St-Zip:
 PALATKA, FL 32178

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: VITA PALTRIDGE PST 10/11/2006