

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000131272

Entity Name: MCMS RETAIL INC.

**FILED**  
**Mar 18, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

8787 66 ST N  
PINELLAS PARK, FL 33782

## **New Principal Place of Business:**

6560 BRIAR RIDGE CT  
PINELLAS PARK, FL 33782

## **Current Mailing Address:**

8787 66 ST N  
PINELLAS PARK, FL 33782

## **New Mailing Address:**

6560 BRIAR RIDGE CT  
PINELLAS PARK, FL 33782

FEI Number: 20-3548774

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

KIZMAZ, MEHMET  
8787 66 ST N  
PINELLAS PARK, FL 33782 US

## **Name and Address of New Registered Agent:**

KIZMAZ, MEHMET  
6560 BRIAR RIDGE CT  
PINELLAS PARK, FL 33782 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: M.KIZMAZ

03/18/2010

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  
Name: KIZMAZ, MEHMET  
Address: 6560 BRIAR RIDGE  
City-St-Zip: PINELLAS PARK, FL 33782

Title: VP  
Name: KIZMAZ, MUHLISE  
Address: 6560 BRIAR RIDGE CT  
City-St-Zip: PINELLAS PARK, FL 33782

Title: T  
Name: BENJAMIN, JEFFREY A  
Address: 6560 BRIAR RIDGE CT  
City-St-Zip: PINELLAS PARK, FL 33782

I hereby 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 all other like empowered.

SIGNATURE: M.KIZMAZ

PD

03/18/2010

Electronic Signature of Signing Officer or Director

Date