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## 2006 FOR PROFIT CORPORATION REINSTATEMENT

1. Entity Nan	MENT #P0500013	9701		06 SEP 22 WHI: 00
Principal Plac 849 WEST 1 HIALEAH, FL		Mailing Address 849 WEST 19 ST HIALEAH, FL 33010		
2. Principal F	Place of Business	3. Mailing Address		
Suite, Apt.	#, etc.	Suite, Apt. #, etc	***	109192006 REIN-A TO REPORT (11/05)
City & Stat	de	City & State		4. FEI Number Applied For [7] Applied For [7] Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired
6. Name and Address of Current Registered Agent			Name .	7. Name and Address of New Registered Agent  OSC (A) DOM (LOVEZ
SOBERAT, HERIBERTO 849 W 19 ST			/ ·	ss (P O. Box Number is Not Acceptable)
HIALEAH, FL 33010		340	1 W 19 St	
			City H	alesh FL Zipcode, O
8. The above the obligat	named entity submits this statement tions of registered agent.	for the purpose of changing its	registered office or regi	stered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or primed name of registered agen	NOT SECRETARY OF THE PRESENTATION OF THE PRESE	E: Registered Agent signature r	9-75-0 C equited when reinstating)
1	LE NOW!!! FEE IS \$150.00 nuary 1, 2007, Foe will be \$300	.00		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS ANI		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME STREET ADDRESS CITY - ST-ZIP	VS SOBERAT, HERIBERTO 849 WEST 19 ST HIALEAH, FL 33010	Delete	THE NAME STREET ADDRESS CITY-ST ZIP	100080228151 09/27/0601053010 **150.00
TITLE NAME	VD MONALES, MARIO	☐ Delete	TITLE	
STREET ADDRESS City-St-Zip	849 WEST 19 ST HIALEAH, FL 33010		NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
	849 WEST 19 ST	☐ Deløle	STREET ADDRESS	☐ Change ☐ Addition ☐ Change ☐ Addition ☐ .
CITY-ST-ZIP  DILE  NAME  SIREET ADDRESS	849 WEST 19 ST HIALEAH, FL 33010 PD DOMINGUEZ, JOSE RAUL 849 WEST 19 ST	☐ Deløle	STREET ADDRESS CITY-ST-ZIP  DITLE NAME STREET ADDRESS	
CITY-ST-Z-P  DYLE  NAME STREET ADCRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS	849 WEST 19 ST HIALEAH, FL 33010 PD DOMINGUEZ, JOSE RAUL 849 WEST 19 ST		STREET ADDRESS CITY-ST-ZIP  DILE NAME STREET ADDRESS C-TY-ST-ZIP  THLE NAME STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP  TITLE  NAME SIREET ADDRESS OFY-ST-ZIP  TITLE  NAME SIREET ADDRESS CITY-ST-ZIP  TITLE  NAME SIREET ADDRESS OTY-ST-ZIP  TITLE  NAME SIREET ADDRESS CITY-ST-ZIP  TITLE  NAME SIREET ADDRESS CITY-ST-ZIP	849 WEST 19 ST HIALEAH, FL 33010 PD DOMINGUEZ, JOSE RAUL 849 WEST 19 ST HIALEAH, FL 33010	☐ Delete ☐ Delete ☐ Delete	STREET ADDRESS CITY-ST-ZIP  DILE NAME STEET ADDRESS C-TY-ST-ZIP  TITLE HAME STREET ADDRESS CITY-ST-ZIP  DILE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition  Change Addition  Change Addition
CITY-ST-ZP  DTLE  NAME SIREEI ADDRESS OTY-ST-ZIP  TITLE  NAME SIREEI ADDRESS CITY-ST-ZIP  11. I hereby c indicated of the cor	849 WEST 19 ST HIALEAH, FL 33010 PD DOMINGUEZ, JOSE RAUL 849 WEST 19 ST HIALEAH, FL 33010  certify that the information supplied with a supplied with the supplier of supplier and the supplier of supplier and the supplier and th	☐ Delete ☐ Delete ☐ Delete ☐ Delete ☐ Delete	STREET ADDRESS CITY-ST-ZIP  DILE HAME STEET ADDRESS C-TY-ST-ZIP  TITLE HAME STREET ADDRESS CITY-ST-ZIP  DILE HAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  OF the exemptions contain my signature shall have to as required by Chapet as	Change Addition  Change Addition  Change Addition

September 19, 2006

Division of Corporations

Florida Kitchen & Cabinets Inc

Dear Sir

Please be advised that I never received the renewal notice of this Corporation , I have been the President since 03/2006 and the renewal notice has not been received in the office after that date I am enclosing 150.00 for the renewal fee .

Sincerely

Jose Raul Dominguez

President