## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P05000166794

Entity Name: SUNSHINE KITCHEN INSTALLATION INC.

FILED Dec 01, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Cullent Finicipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

5542 METROWEST BLVD 8829 FOUNDERS CIRCLE ORLANDO, FL 32811 PALMETTO, FL 34221

Current Mailing Address: New Mailing Address:

5542 METROWEST BLVD 8829 FOUNDERS CIRCLE ORLANDO, FL 32811 PALMETTO, FL 34221

FEI Number: 20-4035082 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

BERBEL, JORGE

5542 METROWEST BLVD

ORLANDO, FL 32811 US

HESS, EDWIN

8829 FOUNDERS CIRCLE
PALMETTO, FL 34221 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: EDWIN HESS 12/01/2006

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: P/D ( ) Delete Title: P/D (X) Change ( ) Addition

 Name:
 BERBEL, JORGE
 Name:
 HESS, EDWIN

 Address:
 5542 METROWEST BLVD
 Address:
 8829 FOUNDERS CIRCLE

City-St-Zip: ORLANDO, FL 32811 City-St-Zip: PALMETTO, FL 34221

 Name:
 HESS, EDWIN
 Name:

 Address:
 3968 CRAYRICH CIR
 Address:

 City-St-Zip:
 ORLANDO, FL 32839
 City-St-Zip:

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

 Name:
 HESS, EDWIN
 Name:

 Address:
 3968 CRAYRICH CIR
 Address:

 City-St-Zip:
 ORLANDO, FL 32839
 City-St-Zip:

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

 Name:
 BERBEL, JORGE
 Name:

 Address:
 5542 METROWEST BLVD
 Address:

 City-St-Zip:
 ORLANDO, FL 32811
 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: EDWIN HESS P/D 12/01/2006