

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000047258

**FILED**  
**Oct 07, 2007**  
**Secretary of State**

**Entity Name:** ONE STOP WHOLESALE SUPPLIES INC

**Current Principal Place of Business:**

800 CELEBRATION AVENUE SUITE 227  
CELEBRATION, FL 34747

**New Principal Place of Business:**

**Current Mailing Address:**

800 CELEBRATION AVENUE SUITE 227  
CELEBRATION, FL 34747

**New Mailing Address:**

FEI Number: 20-4702320

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

SHARMAN, JULIE  
1048 SOARING EAGLE LN  
KISSIMMEE, FL 34746 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: JULIE SHARMAN

10/07/2007

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: PSTD ( ) Delete  
Name: SHARMAN, JULIE  
Address: 800 CELEBRATION AVENUE SUITE 227  
City-St-Zip: CELEBRATION, FL 34747

Title: V ( ) Delete  
Name: SHARMAN, BENJAMIN  
Address: 800 CELEBRATION AVENUE SUITE 227  
City-St-Zip: CELEBRATION, FL 34747

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: JULIE SHARMAN

PRES

10/07/2007

Electronic Signature of Signing Officer or Director

Date