

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000060321

**FILED**  
**Oct 06, 2011**  
**Secretary of State**

**Entity Name:** BELETTE'S CUSTOM CABINETS GROUP, INC.

**Current Principal Place of Business:**

250 NW 12 STREET  
UNIT #6  
FLORIDA CITY, FL 33034

**New Principal Place of Business:**

**Current Mailing Address:**

30207 SW 162 AVE  
HOMESTEAD, FL 33033

**New Mailing Address:**

PO BOX 344505  
FLORIDA CITY, FL 33034

**FEI Number:** 13-4332306

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BELETTE, FRANCISCO  
250 NW 12 STREET  
UNIT #6  
FLORIDA CITY, FL 33034 US

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

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:** FRANCISCO BELETTE

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** BELETTE, FRANCISCO  
**Address:** 30207 SW 162 AVE  
**City-St-Zip:** HOMESTEAD, FL 33033

**Title:** VP  
**Name:** BELETTE, MARINO  
**Address:** 30070 SW 160 AVE  
**City-St-Zip:** HOMESTEAD, FL 33033

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:** FRANCISCO BELETTE

PD

10/06/2011

Electronic Signature of Signing Officer or Director

Date