

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000078479

FILED
Apr 29, 2008
Secretary of State

Entity Name: KONSTANTINOS DESIGNERS & ASSOCIATES, INC.

Current Principal Place of Business:

113 NW 35TH STREET
MIAMI, FL 33127

New Principal Place of Business:

4489 NORTH SHORE DRIVE
PORT CHARLOTTE, FL 33980

Current Mailing Address:

113 NW 35TH STREET
MIAMI, FL 33127

New Mailing Address:

4489 NORTH SHORE DRIVE
PORT CHARLOTTE, FL 33980

FEI Number: 20-5033061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TSONGOS, KONSTANTINOS
113 NW 35TH STREET
MIAMI, FL 33127 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: KONSTANTINOS TSONGOS

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: P () Delete
Name: TSONGOS, KONSTANTINOS
Address: 113 NW 35TH STREET
City-St-Zip: MIAMI, FL 33127

Title: S/T () Delete
Name: TSONGOS, KONSTANTINOS
Address: 113 NW 35TH STREET
City-St-Zip: MIAMI, FL 33127

Title: D () Delete
Name: TSONGOS, KONSTANTINOS
Address: 113 NW 35TH STREET
City-St-Zip: MIAMI, FL 33127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TSONGOS, KONSTANTINOS
Address: 4489 NORTH SHORE DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: S/T (X) Change () Addition
Name: TSONGOS, KONSTANTINOS
Address: 4489 NORTH SHORE DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: D (X) Change () Addition
Name: TSONGOS, KONSTANTINOS
Address: 4489 NORTH SHORE DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33127

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: KONSTANTINOS TSONGOS

PST

04/29/2008

Electronic Signature of Signing Officer or Director

Date