

**2007 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 04, 2007  
Secretary of State**

DOCUMENT# P06000103723

Entity Name: CARMELO QUALITY CARPENTRY, INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

3078 FLORIDA BLVD.  
PALM BCH GARDENS, FL 33410

**Current Mailing Address:**

**New Mailing Address:**

3078 FLORIDA BLVD.  
PALM BCH GARDENS, FL 33410

FEI Number: 20-5347911      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

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

TAX HOUSE CORPORATION  
1261 E. SAMPLE RD.  
POMPANO BCH, FL 33064      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: CARMELA VASILE

\_\_\_\_\_  
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: PD      ( ) Delete  
Name: VASILE, CARMELO  
Address: 3078 FLORIDA BLVD.  
City-St-Zip: PALM BCH GARDENS, FL 33410

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: CARMELO VASILE

PD

10/04/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date