2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000143298

City-St-Zip:

BRUNSWICK, GA 31520

FILED Oct 12, 2007 Secretary of State

Entity Name: CABINETS & FLOORS DIRECT, INC.					
Current Pr	incipal Place	of Business:	New Principal Place	of Business:	
811 NE 16T OCALA, FL					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
226 BEECHWOOD COURT ORANGE PARK, FL 32073			811 NE 16TH STREE [*] OCALA, FL 34470	811 NE 16TH STREET OCALA, FL 34470	
FEI Number:	02-0791245	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
CLAUSS, CHANCE 226 BEECHWOOD COURT ORANGE PARK, FL 32073 US				811 NE 16TH STREET	
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.					
SIGNATUR	E: ELTEN ST	UBBS		10/12/2007	
Electronic Signature of Registered Agent			nt	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/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () [CLAUSS, CHANG 226 BEECHWOO ORANGE PARK,	DD COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () I STUBBS, ELTEN 119 GLEN AVEN BRANSWICK, GA	UE, SUITE 48	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	SEC () [STUBBS, JOHN 119 GLEN AVEN	Delete UE, SUITE 48	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: ELTEN STUBBS V 10/12/2007