

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000145487

**FILED**  
**Oct 05, 2007**  
**Secretary of State**

**Entity Name:** DESIGN CONCEPTS AND SOLUTIONS GROUP INCORPORATED

**Current Principal Place of Business:**

35249 QUEENS WAY  
FRUITLAND PARK, FL 34749

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 493256  
LEESBURG, FL 34731

**New Mailing Address:**

PO BOX 493258  
LEESBURG, FL 34731

FEI Number: 20-5897967

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COUNTERTOP SHOP OF OCALA  
1041 NE 14TH ST  
OCALA, FL 34470 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: SHELIA MCGEE

\_\_\_\_\_  
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: MCGEE, SHELIA  
Address: 35249 QUEENS WAY  
City-St-Zip: FRUITLAND PARK, FL 34731

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

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: SHELIA MCGEE

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

MS.

10/05/2007

\_\_\_\_\_  
Date