

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000157472

FILED
Oct 30, 2008
Secretary of State

Entity Name: S & S ENTERPRISES OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

234 HIGHGATE PARK BLVD
DAVENPORT, FL 33897 US

New Principal Place of Business:

9310 US HWY 192
4
CLERMONT, FL 34714 US

Current Mailing Address:

234 HIGHGATE PARK BLVD
DAVENPORT, FL 33897 US

New Mailing Address:

9310 US HWY 192
4
CLERMONT, FL 34714 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

A H GANTT CPA & ASSOCIATES PA
3359 W VINE ST
104
KISSIMMEE, FL 34741 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: DEREK BREEN

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: SIMPSON, STEVEN
Address: 234 HIGHGATE PARK BLVD
City-St-Zip: DAVENPORT, FL 33897 US

Title: VP () Delete
Name: SIMPSON, SAMANTHA
Address: 234 HIGHGATE PARK BLVD
City-St-Zip: DAVENPORT, FL 33897 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SIMPSON, STEVEN
Address: 11716 SHELTERING PINE DRIVE
City-St-Zip: ORLANDO, FL 32836 US

Title: VP (X) Change () Addition
Name: SIMPSON, SAMANTHA
Address: 11716 SHELTERING PINE DRIVE
City-St-Zip: ORLANDO, FL 32836 US

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: STEVEN SIMPSON

P

10/30/2008

Electronic Signature of Signing Officer or Director

Date