

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000004615

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** WOLFE KITCHEN & BATH INC.

**Current Principal Place of Business:**

405 34TH STREET  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

958 SERVICE RD.  
WEST PALM BEACH, FL 33407

**Current Mailing Address:**

405 34TH STREET  
WEST PALM BEACH, FL 33407

**New Mailing Address:**

**FEI Number:** 74-3201156

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EDWARDS, MICHAEL C  
1001 N US HIGHWAY ONE  
SUITE 400  
JUPITER, FL 33477 US

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

KUHARCIK, JOSEPH  
1211 PLAZA CIRCLE  
SINGER ISLAND, FL 33404 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: JOSEPH KUHARCIK

04/27/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WOLFE, ARNOLD  
Address: 405 34TH STREET  
City-St-Zip: WEST PALM BEACH, FL 33407

I hereby 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 all other like empowered.

SIGNATURE: ARNOLD WOLFE

PD

04/27/2011

Electronic Signature of Signing Officer or Director

Date