2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 29, 2009
Secretary of State

DOCUMENT# P07000048345

Entity Name: CUSTOM VINTAGE FLOORING, INC.

Current Principal Place of Business:

5929-1 YOUNGQUIST RD
FORT MYERS, FL 33912

New Principal Place of Business:

15345 BRIARCREST CIRCLE
FORT MYERS, FL 33912

Current Mailing Address:

5929-1 YOUNGQUIST RD
FORT MYERS, FL 33912

New Mailing Address:

15345 BRIARCREST CIRCLE
FORT MYERS, FL 33912

FEI Number: 20-8892707 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GOREN, DARA
5929-1 YOUNGQUIST RD
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

GOREN, DARA D
15345 BRIARCREST CIRCLE
FORT MYERS, FL 33912 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: DARA D. GOREN 09/29/2009
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: DVS ( ) Delete
Name: GOREN, DARA
Address: 5929-1 YOUNGQUIST RD
City-St-Zip: FORT MYERS, FL 33912

Title: DPT ( ) Delete
Name: LAFLAMME, CHAD
Address: 5929-1 YOUNGQUIST RD
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVS (X) Change ( ) Addition
Name: GOREN, DARA D
Address: 15345 BRIARCREST CIRCLE
City-St-Zip: FORT MYERS, FL 33912

Title: DPT (X) Change ( ) Addition
Name: LAFLAMME, CHAD
Address: 15345 BRIARCREST CIRCLE
City-St-Zip: FORT MYERS, FL 33912

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: DARA D. GOREN DVS 09/29/2009
Electronic Signature of Signing Officer or Director Date