

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P11000044734

**FILED**  
**May 29, 2014**  
**Secretary of State**

**Entity Name:** C & M WALLCOVER & WALLART CORP.

**Current Principal Place of Business:**

25 NE 154 STREET  
NORTH MIAMI BEACH, FL 33162

**New Principal Place of Business:**

14920 NW 3RD AVE  
MIAMI, FL 33168

**Current Mailing Address:**

25 NE 154 STREET  
NORTH MIAMI BEACH, FL 33162

**New Mailing Address:**

14920 NW 3RD AVE  
MIAMI, FL 33168

**FEI Number:** 46-2535729

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

AREAS, CARLOS H  
25 NE 154 STREET  
NORTH MIAMI BEACH, FL 33162 US

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

AREAS, CARLOS H  
14920 NW 3RD AVE  
MIAMI, FL 33168 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: CARLOS H AREAS

05/29/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: AREAS, CARLOS H  
Address: 14920 NW 3RD AVE  
City-St-Zip: MIAMI, FL 33168

Title: D  
Name: FLORES, MIRIAM H  
Address: 14920 NW 3RD AVE  
City-St-Zip: MIAMI, FL 33168

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: CARLOS H AREAS

MR.

05/29/2014

Electronic Signature of Signing Officer or Director

Date