

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000097916

FILED
Jan 11, 2006
Secretary of State

Entity Name: AABLE SCREENROOMS AND ENCLOSURES, INC.

Current Principal Place of Business:

1008 LORING AVENUE
SUITE 28
ORANGE PARK, FL 32073

New Principal Place of Business:

927 IRONRIDGE COURT
ORANGE PARK, FL 32065

Current Mailing Address:

1008 LORING AVENUE
SUITE 28
ORANGE PARK, FL 32073

New Mailing Address:

927 IRONRIDGE COURT
ORANGE PARK, FL 32065

FEI Number: 59-3747639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HICKS, S. DAVID
1710 SHADOWOOD LANE, #220
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

CICORA, MICHAEL S
927 IRONRIDGE COURT
ORANGE PARK, FL 32065 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: MICHAEL S. CICORA

01/11/2006

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: D () Delete
Name: CICORA, MICHAEL S
Address: 1710 SHADOWOOD LANE, #220
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: CICORA, MARY M
Address: 1710 SHADOWOOD LANE, #220
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: CICORA, ANTHONY J
Address: 1710 SHADOWOOD LANE, #220
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CICORA, MICHAEL S
Address: 927 IRONRIDGE COURT
City-St-Zip: ORANGE PARK, FL 32065

Title: D (X) Change () Addition
Name: CICORA, ANTHONY J
Address: 927 IRONRIDGE COURT
City-St-Zip: ORANGE PARK, FL 32065

Title: D (X) Change () Addition
Name: CICORA, MARY M
Address: 927 IRONRIDGE COURT
City-St-Zip: ORANGE PARK, FL 32065

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL S. CICORA

D

01/11/2006

Electronic Signature of Signing Officer or Director

Date