

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 625166

Entity Name: ABBE-HAS-A-CRANE, INC.

**FILED**  
**Oct 19, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

525 PRODUCTION BLVD  
NAPLES, FL 34104

**New Principal Place of Business:**

**Current Mailing Address:**

525 PRODUCTION BLVD  
NAPLES, FL 34104

**New Mailing Address:**

FEI Number: 59-1908113

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ABBOTT, STEVE  
525 PRODUCTION BLVD  
NAPLES, FL 34104 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: STEVE ABBOTT

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PS  
Name: ABBOTT, STEVE  
Address: 525 PRODUCTION BLVD  
City-St-Zip: NAPLES, FL 34104 US

Title: VPT  
Name: ABBOTT, WENDY  
Address: 5860 DOGWOOD WAY  
City-St-Zip: NAPLES, FL 34116 US

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: STEVE ABBOTT

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PS

10/19/2013

\_\_\_\_\_  
Date