

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F01000004635

FILED  
Sep 20, 2007  
Secretary of State

Entity Name: OHIO DECORATIVE PRODUCTS, INC.

**Current Principal Place of Business:**

3225 NW 107TH STREET  
MIAMI, FL 33167

**New Principal Place of Business:**

**Current Mailing Address:**

3225 NW 107TH STREET  
MIAMI, FL 33167

**New Mailing Address:**

FEI Number: 34-4427239

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEOPOLD, HERMAN  
3225 NW 107TH STREET  
MIAMI F, FL 33167 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: HERMANN LEOPOLD

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: PC ( ) Delete  
Name: MOELLER, CHARLES D  
Address: PO BOX 126  
City-St-Zip: SPENCERVILLE, OH 458870126

Title: ST ( ) Delete  
Name: JERWERS, DONALD L  
Address: PO BOX 126  
City-St-Zip: SPENCERVILLE, OH 458870126

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: AS ( ) Change (X) Addition  
Name: STEPLETON, JOHN S  
Address: PO BOX 126  
City-St-Zip: SPENCERVILLE, OH 45887

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: JOHN S STEPLETON

AS

09/20/2007

Electronic Signature of Signing Officer or Director

Date