

**2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Feb 22, 2010  
Secretary of State**

DOCUMENT# P01000026752

Entity Name: AMBEL SOLUTIONS, INC.

**Current Principal Place of Business:**

8981 FALCON POINTE LOOP  
FORT MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

8981 FALCON POINTE LOOP  
FORT MYERS, FL 33912

**New Mailing Address:**

FEI Number: 59-3706404      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NIEDERMAIR, PETRA P.T  
8981 FALCON POINTE LOOP  
FT MYERS, FL 33912    US

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

NIEDERMAIR, PETRA  
8981 FALCON POINTE LOOP  
FT 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: NIEDERMAIR PETRA      02/22/2010  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: P.T  
Name: NIEDERMAIR, PETRA  
Address: 8981 FALCON POINTE LOOP  
City-St-Zip: FORT MYERS, FL 33912

Title: S  
Name: NIEDERMAIR, GUENTER  
Address: 8981 FALCON POINTE LOOP  
City-St-Zip: FORT MYERS, FL 33912

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: NIEDERMAIR PETRA      P.T      02/22/2010  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date