

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P01000093352

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Entity Name:** ACCU-PRESSURE SAFETY CAPS, INC.

**Current Principal Place of Business:**

440 S FEDERAL HWY  
203  
DEERFIELD BEACH, FL 33441

**New Principal Place of Business:**

149 LAS BRISAS CIRCLE  
HYPOLUXO, FL 33462

**Current Mailing Address:**

440 S FEDERAL HWY  
203  
DEERFIELD BEACH, FL 33441

**New Mailing Address:**

PO BOX 3434  
LANTANA, FL 334653434

**FEI Number:** 65-1139577

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOLDBERG, ADAM  
440 S FEDERAL HWY SUITE #203  
DEERFIELD BEACH, FL 33441 US

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

GOLDBERG, ADAM  
149 LAS BRISAS CIRCLE  
HYPOLUXO, FL 33462 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: ADAM GOLDBERG

03/21/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GOLDBERG, ADAM  
Address: 149 LAS BRISAS CIRCLE  
City-St-Zip: HYPOLUXO, FL 33462

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: ADAM GOLDBERG

CEO

03/21/2012

Electronic Signature of Signing Officer or Director

Date