

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P01000113031

Entity Name: WBA FABRICATION INC.

**FILED**  
**Sep 06, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3435 ENTERPRISE AVE # 30  
NAPLES, FL 34104

**New Principal Place of Business:**

3435 ENTERPRISE AVE  
#29-30  
NAPLES, FL 34104

**Current Mailing Address:**

3435 ENTERPRISE AVE # 30  
NAPLES, FL 34104

**New Mailing Address:**

3435 ENTERPRISE AVE  
#29-30  
NAPLES, FL 34104

FEI Number: 01-0563790

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ALGER, WILLIAM B  
1283 RAINBOW CT  
NAPLES, FL 34110 US

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

ALGER, WILLIAM B  
484 PALM RIVER BLVD  
NAPLES, FL 34110 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: WILLIAM B ALGER

09/06/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PS  
Name: ALGER, WILLIAM B  
Address: 484 PALM RIVER BLVD  
City-St-Zip: NAPLES, FL 34110

Title: PS  
Name: ALGER, WILLIAM B  
Address: 484 PALM RIVER BLVD  
City-St-Zip: NAPLES, FL 34110

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: WILLIAM B ALGER

PS

09/06/2010

Electronic Signature of Signing Officer or Director

Date