

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000011379

1. Entity Name
ACOUSTIWALL OF FLORIDA, INC.



FILED

2008 APR 14 AM 6:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT
04082008 REIN-P CR2E098 (1/07) 07-08

Principal Place of Business
1673 SOUTHWEST 158TH TERRACE
PEMBROKE PINES, FL 33027

Mailing Address
1673 SOUTHWEST 158TH TERRACE
PEMBROKE PINES, FL 33027

2. Principal Place of Business - No P.O. Box #
6210 Jacob Canyon Dr.

3. Mailing Address
6210 Jacob Canyon Dr.

Suite, Apt. #, etc.

City & State
Katy TX

Zip
77450

Country
USA

4. FEI Number
59-3767670

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CHAPELLIN, GUILLERMO
1673 SW 158TH TERRACE
PEMBROKE PINES, FL 33027

7. Name and Address of New Registered Agent
Name
Eduardo Valladares
Street Address (P.O. Box Number is Not Acceptable)
1208 N STATE RD 7
City
Hollywood FL Zip Code
33021

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Eduardo Valladares* 4/8/08

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD CHAPELLIN, GUILLERMO 1673 SOUTHWEST 158TH TERRACE PEMBROKE PINES, FL 33027 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 6210 Jacob Canyon Dr Katy TX 77450
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD CHAPELLIN, ROSITA 1673 SOUTHWEST 158TH TERRACE PEMBROKE PINES, FL 33027 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 6210 Jacob Canyon Dr. Katy TX 77450
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000123276980 04/14/08--01049--017 **300.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.

SIGNATURE: *Guillermo Chapellin* 4/8/08 713-294-4742

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

APR 14 2008