

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000132517

Entity Name: ADL SYSTEMS, INC.

FILED  
Apr 02, 2007  
Secretary of State

**Current Principal Place of Business:**

8205 SW 152 AVE  
412  
MIAMI, FL 33193

**New Principal Place of Business:**

1200 BLALOCK  
170  
HOUSTON, TX 77055

**Current Mailing Address:**

8205 SW 152 AVE  
412  
MIAMI, FL 33193

**New Mailing Address:**

FEI Number: 01-0820908

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RAPPORT, STEPHEN R  
201 ALHAMBRA CIRCLE  
SUITE 711  
CORAL GABLES, FL 33134 US

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

GALEANO, ADOLINA  
6025 S.W. 162 AV.  
MIAMI, FL 33193 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: ADOLINA GALEANO

04/02/2007

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: PD ( ) Delete  
Name: GALEANO, ADOLINA  
Address: 8205 SW 152 AVE  
City-St-Zip: MIAMI, FL 33193

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

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

Title: PD (X) Change ( ) Addition  
Name: GALEANO, ADOLINA  
Address: 6025 S.W 162 AV.  
City-St-Zip: MIAMI, FL 33193

Title: VP ( ) Change (X) Addition  
Name: GOMEZ, WIRMEN  
Address: 6025 S.W 162 AV.  
City-St-Zip: MIAMI, FL 33193

I hereby certify that the information supplied with this filing does not qualify for the 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: ADOLINA GALEANO

PD

04/02/2007

Electronic Signature of Signing Officer or Director

Date