

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000047671

**FILED**  
**Feb 25, 2012**  
**Secretary of State**

**Entity Name:** INNOVATIVE INSTALLATIONS, INC.

**Current Principal Place of Business:**

19747 QUINLAN STREET  
ORLANDO, FL 32833 US

**New Principal Place of Business:**

675 LOGGERHEAD ISLAND DRIVE  
SATELLITE BEACH, FL 32937 US

**Current Mailing Address:**

19747 QUINLAN STREET  
ORLANDO, FL 32833 US

**New Mailing Address:**

675 LOGGERHEAD ISLAND DRIVE  
SATELLITE BEACH, FL 32937 US

**FEI Number:** 42-1622064

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALL FLORIDA FIRM INC  
813 DELTONA BLVD., SUITE A  
BOX #1583187  
DELTONA, FL 32725 US

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

SIMIC, ZORAN P  
675 LOGGERHEAD ISLAND DRIVE  
SATELLITE BEACH, FL 32937 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: ZORAN SIMIC

02/25/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SIMIC, ZORAN  
Address: 675 LOGGERHEAD ISLAND DRIVE  
City-St-Zip: SATELLITE BEACH, FL 32937 US

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: ZORAN SIMIC

P

02/25/2012

Electronic Signature of Signing Officer or Director

Date