

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000134095

**FILED**  
**Oct 14, 2013**  
**Secretary of State**

**Entity Name:** ABL ARCHITECTURAL PRODUCTS CORP.

**Current Principal Place of Business:**

6510 NW 16TH STREET  
GAINESVILLE, FL 32653 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 357113  
GAINESVILLE, FL 32635 US

**New Mailing Address:**

**FEI Number:** 20-3568052

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DM SMITH & CO CPA  
2531-A NW 41ST STREET  
GAINESVILLE, FL 32606 US

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

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:** DENNIS SMITH

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PV  
**Name:** RIVERA-RODRIGUEZ, LUIS A  
**Address:** P O BOX 357113  
**City-St-Zip:** GAINESVILLE, FL 32635 US

**Title:** S  
**Name:** RIVERA, ASTRID V  
**Address:** P O BOX 357113  
**City-St-Zip:** GAINESVILLE, FL 32635 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:** ASTRID V. RIVERA

S

10/14/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date