

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000006237

**FILED**  
**Mar 03, 2010**  
**Secretary of State**

**Entity Name:** ARCHITECTURAL GLAZING SERVICES, INC.

**Current Principal Place of Business:**

3850 EAGLE ISLE CIRCLE  
KISSIMMEE, FL 34746

**New Principal Place of Business:**

**Current Mailing Address:**

3850 EAGLE ISLE CIRCLE  
KISSIMMEE, FL 34746

**New Mailing Address:**

**FEI Number:** 20-4124883

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VARGAS, ANNETTE  
3850 EAGLE ISLE CIRCLE  
KISSIMMEE, FL 34746 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:** MARIA RAMOS

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: D  
Name: VARGAS, ANNETTE  
Address: 3850 EAGLE ISLE CIRCLE  
City-St-Zip: KISSIMMEE, FL 34746

Title: D  
Name: RAMOS, MARIA E  
Address: 3850 EAGLE ISLE CIRCLE  
City-St-Zip: KISSIMMEE, FL 34746

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:** MARIA RAMOS

D

03/03/2010

Electronic Signature of Signing Officer or Director

Date