

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000031442

Entity Name: A+ SALES INC.

**FILED**  
**Oct 13, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

6915 SW 185TH WAY  
SOUTHWEST RANCHES, FL 33332

**New Principal Place of Business:**

**Current Mailing Address:**

6915 SW 185TH WAY  
SOUTHWEST RANCHES, FL 33332

**New Mailing Address:**

FEI Number: 03-0584019

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TERRIBLE, TARA  
6915 SW 185 WAY  
SOUTHWEST RANCHES, FL 33332 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: TARA TERRIBLE

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: TERRIBLE, FREDERICK G  
Address: 6915 SW 185 WAY  
City-St-Zip: SW RANCHES, FL 33332

Title: VPD  
Name: PILGER, DONALD P  
Address: 6915 SW 185 WAY  
City-St-Zip: SW RANCHES, FL 33332

Title: STD  
Name: TERRIBLE, TARA P  
Address: 6915 SW 185 WAY  
City-St-Zip: SW RANCHES, FL 33332

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: TARA TERRIBLE

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

STD

10/13/2010

\_\_\_\_\_  
Date