


2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED

2008 MAR 11 AM 8:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P06000035396	
1. Entity Name STORMBLOK SYSTEMS, INCORPORATED	

Principal Place of Business 364 ESTERO COURT SAFETY HARBOR, FL 34695	Mailing Address 364 ESTERO COURT SAFETY HARBOR, FL 34695
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2. Principal Place of Business - No P.O. Box # 972 Alderman Rd.	3. Mailing Address 972 Alderman Rd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Palmyra, NY	City & State Palmyra, NY
Zip 14522	Country USA



02112008 REIN-P CR2E098 (1/07)

4. FEI Number 20-0725590	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent Incorporating Services, Ltd. 1540 Glenway Dr. Tallahassee, FL 32301	7. Name and Address of New Registered Agent Name Harter Secrest & Emery LLP Street Address (P.O. Box Number is Not Acceptable) 5551 Ridgewood Dr, Suite 405 City Naples FL Zip Code 34108-2719
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8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.	Brian V. McAvoy, Esq. 3/6/08 (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$900.00

10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																																
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.
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SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	3/5/08 Date	585-749-8943 Daytime Phone #
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J. Parr Wiegel, President

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