

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000054059

**FILED**  
**May 10, 2012**  
**Secretary of State**

**Entity Name:** ELLIS COMBS WELDING INC

**Current Principal Place of Business:**

518 SW 15 ST.  
FORT LAUDERDALE, FL 33315 US

**New Principal Place of Business:**

1122 CEPHIA ST  
LAKE WALES, FL 33853 US

**Current Mailing Address:**

518 SW 15 ST.  
FORT LAUDERDALE, FL 33315 US

**New Mailing Address:**

1122 CEPHIA ST  
LAKE WALES, FL 33853 US

**FEI Number:** 20-4824286

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

COMBS, ELLIS  
518 SW 15 ST.  
FORT LAUDERDALE, FL 33315 US

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

COMBS, ELLIS  
1122 CEPHIA ST  
LAKE WALES, FL 33853 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: ELLIS COMBS

05/10/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: COMBS, ELLIS  
Address: 1122 CEPHIA ST  
City-St-Zip: LAKEWALES, FL 33853 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: ELLIS P COMBS JR

PRES

05/10/2012

Electronic Signature of Signing Officer or Director

Date