

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000039855

FILED  
Nov 03, 2008  
Secretary of State

Entity Name: O.K. HURRICANE SHUTTERS CORP

## Current Principal Place of Business:

1350 W 53 ST #5  
HIALEAH, FL 33012

## New Principal Place of Business:

## Current Mailing Address:

1350 W 53 ST #5  
HIALEAH, FL 33012

## New Mailing Address:

FEI Number: 51-0642114

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARTEAGA, OTTO A  
1350 W 53 ST #5  
HIALEAH, FL 33012 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: OTTO ARTEAGA

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 ( ) Delete  
Name: ARTEAGA, OTTO A  
Address: 1350 W 53 ST #5  
City-St-Zip: HIALEAH, FL 33012

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: VERA, EDUARDO E  
Address: 2725 W 66TH ST # 14  
City-St-Zip: HIALEAH, FL 33016

Title: D ( ) Change (X) Addition  
Name: DE JESUS, FRANKLIN P  
Address: 10128 NW 26 AVE  
City-St-Zip: MIAMI, FL 33147

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: OTTO ARTEAGA

D

11/03/2008

Electronic Signature of Signing Officer or Director

Date