

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000081789

FILED
Nov 04, 2009
Secretary of State

Entity Name: ARCHITECTURE IN GLASS VITRALS LEVA'K, INC.

Current Principal Place of Business:

10613 HAMMOCKS BLVD SUITE #234
MIAMI, FL 331962639

New Principal Place of Business:

10645 HAMMOCKS BLVD SUITE
721
MIAMI, FL 331962639

Current Mailing Address:

10613 HAMMOCKS BLVD SUITE #234
MIAMI, FL 331962639

New Mailing Address:

10645 HAMMOCKS BLVD
721
MIAMI, FL 331962639

FEI Number: 94-3455334

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIDAL ACEVEDO, LOURDES E
10613 HAMMOCKS BLVD SUITE #234
MIAMI, FL 331962639 US

Name and Address of New Registered Agent:

VIDAL ACEVEDO, LOURDES E
10645 HAMMOCKS BLVD SUITE
721
MIAMI, FL 331962639 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: LOURDES VIDAL

11/04/2009

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: VIDAL ACEVEDO, LOURDES E
Address: 10613 HAMMOCKS BLVD SUITE #234
City-St-Zip: MIAMI, FL 331962639

Title: P () Delete
Name: CESPEDES, ALBERTO VERA
Address: 10613 HAMMOCKS BLVD SUITE #234
City-St-Zip: MIAMI, FL 331962639

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: VIDAL ACEVEDO, LOURDES E
Address: 10645 HAMMOCKS BLVD SUITE # 721
City-St-Zip: MIAMI, FL 331962639

Title: P (X) Change () Addition
Name: CESPEDES, ALBERTO VERA
Address: 10645 HAMMOCKS BLVD SUITE # 721
City-St-Zip: MIAMI, FL 331962639

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: ALBERTO VERA

P

11/04/2009

Electronic Signature of Signing Officer or Director

Date