

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P30623

Entity Name: G.A. ANDRON & CO., INC.

**FILED**  
**May 08, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

89 NORTH INDUSTRY CT.  
DEER PARK, NY 11729 US

**New Principal Place of Business:**

**Current Mailing Address:**

89 NORTH INDUSTRY CT.  
DEER PARK, NY 11729 US

**New Mailing Address:**

1045 W STATE ROUTE 108  
SHELTON, WA 98584 US

FEI Number: 56-1673671

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REGISTERED AGENT SOLUTIONS INC.  
155 OFFICE PLAZA DR  
SUITE A  
TALLAHASSEE, FL 32301 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: REGISTERED AGENT SOLUTIONS, INC.

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RAVELLI, ALFONS  
Address: ELEMENTENTRAAT 13 1014 AR POST BUS 8171  
City-St-Zip: AMSTERDAM NL OC

Title: ACC  
Name: SYMONETTE, JOANN  
Address: 1045 W STATE ROUTE 108  
City-St-Zip: SHELTON, WA 98584

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: JOANN SYMONETTE

ACC

05/08/2012

Electronic Signature of Signing Officer or Director

Date