

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000195

**FILED**  
**Mar 14, 2012**  
**Secretary of State**

**Entity Name:** ABRAMS ARCHITECTURAL PRODUCTS, INC.

**Current Principal Place of Business:**

7110 OAK RIDGE PARKWAY  
AUSTELL, GA 30168

**New Principal Place of Business:**

7260 DELTA CIRCLE  
AUSTELL, GA 30168

**Current Mailing Address:**

7110 OAK RIDGE PARKWAY  
AUSTELL, GA 30168

**New Mailing Address:**

7260 DELTA CIRCLE  
AUSTELL, GA 30168

**FEI Number:** 47-0849629

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: ABRAMS, FRANK  
Address: 7260 DELTA CIRCLE  
City-St-Zip: AUSTELL, GA 30168

Title: VP  
Name: ABRAMS, MARK  
Address: 7260 DELTA CIRCLE  
City-St-Zip: AUSTELL, GA 30168

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: MARK ABRAMS

V.P.

03/14/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date