

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

03 NOV 26 AM 9:48

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # PO2 000122927

1. Corporation Name  
T & D Installations of Sarasota, Inc.

2. Principal Office Address 4017 Swift Road Suite, Apt. #, etc.		3. Mailing Office Address	
City & State Sarasota, FL		City & State	
Zip 34232	Country US	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida 11/18/2002	
5. FEI Number 41-2067632	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

**REINSTATEMENT 03**

7. Name and Address of Current Registered Agent

Name: Daniel L. Prewett

Street Address (P.O. Box Number is Not Acceptable): 5777 Beneva Road South

Suite, Apt. #, Etc.: 300025069283

City: Sarasota

State: FL

Zip Code: 34233

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: *[Signature]* REGISTERED AGENT MUST SIGN DANIEL PREWETT

Date: 11/25/03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	John F. Lamb	4017 Swift Rd.	Sarasota FL 34232
S/D	Humberto Fernandez	" "	" "
T/D	Garry Blackwell	" "	" "

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: *[Signature]* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 11-25-03

Daytime Phone #: 941-376-0346

CR2E081 (10/02)

2

**T & D Installations of Sarasota, Inc.**  
**4017 Swift Road**  
**Sarasota, FL 34232**  
**(941) 926-0222 Fax (941) 924-4167**

November 25, 2003


Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

Gentlemen,

This letter is in reference to the administrative dissolution of my corporation, T & D Installations of Sarasota, Inc. that was filed on September 19, 2003. The address listed for the corporation was 4607 Webber St. Sarasota, FL, but shortly after forming the corporation we relocated to 4017 Swift Road, also in Sarasota. The forwarding service of the USPS expired and we no longer received mail sent to the Webber address. We never received the UBR and thus never renewed our corporate status with the state. Upon our attempt to file the re-issuance for Worker's Comp., we realized what had happened. Please understand that there was no intentional disregard for the laws and regulations set forth to govern corporations by any director of T & D. Please accept the enclosed \$150.00 check, and reinstate our company in good standing.

In sincere appreciation of your consideration, I remain,

Sincerely,

  
John F. Lamb

Enc.