

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR



FLORIDA DEPARTMENT OF STATE  
 Katherine Harris  
 Secretary of State  
 DIVISION OF CORPORATIONS

**FILED**

99 OCT 19 PM 5:50

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # **P95000010575**

1. Corporation Name

**BERTOLINO ELECTRICAL SERVICES, INC.**

Principal Place of Business

1231 NE 13 AVE  
 FT LAUDERDALE FL 33304

Mailing Address

1231 NE 13 AVE  
 FT LAUDERDALE FL 33304

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

02/06/1995

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0564363

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	BERTOLINO, PAUL	1231 NE 13 AVE	FT LAUDERDALE FL 33304

300003026923--4  
 -10/27/99--01089--014  
 \*\*\*\*\*150.00 \*\*\*\*\*150.00

ITS

8. Name and Address of Current Registered Agent

BERTOLINO, PAUL  
 1231 NE 13 AVE  
 FT LAUDERDALE FL 33304

9. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 Suite, Apt. #, Etc.  
 City State Zip Code  
 FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent *[Signature]* **REQUIRED**  
 REGISTERED AGENT MUST SIGN

Date

11. 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]* **REQUIRED**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/13/99 (954) 522-3389  
 Date Daytime Phone #

CFR200 (8/99)

## **Bertolino Electrical Services**

1231 NE 13th Avenue  
Fort Lauderdale, Fl. 33304

Phone 522-3389

October 13, 1999

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Division of Corporations  
Annual Report/Reinstatement Section  
PO Box 6327  
Tallahassee, Fl. 32314-6327

To whom it may concern:

As per a phone conversation I had today with one of your representatives, I am enclosing another check for \$150.

On April 23, 1999, I sent in my original check and annual report. That check has never been cashed or returned to me. My accountant had sent in my original check stub and letter explaining that it had never been cashed but nothing was resolved at that point.

Hopefully this will clear up this matter. Thank you.

Sincerely,



Paul Bertolino  
President