PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Secretary of State

DIVISION OF CORPORATIONS 6 NOV 25 PH 3: 46 F68661 DOCUMENT #

SECRETARY OF STATE

	LER ELECTRIC SERVIC	E. INC			TALLA	HASSEE, FL	ORIDA			
		_,							ng Ng	
Principal Place of Business Malling Address						-				
5001-16W: 153-57. RT-1-BOX-514P										
MATRIATE Ft. 3365 MORNIGTO			I-Pt-0200-			I I I I I I I I I I I I I I I I I I I				
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	addresses are incorrect in any way, line thi					REINS	STATEMENT		V	
2. New Principal Office Address, If Applicable Sold SE IT AVE Suite, Apt. #, etc. Suite, Apt. #, etc.				Office Address, If Applicable			4. Date Incorporated or Qualified To Do Business in Florida 02/25/1982			
MORDISTAN, FL 505			TI SE 117 AVE			5. FEI Number 59-2205443			Applied For	
City & Stat	e	MOR	RISIO	W. F.	<u>_</u>			i de	Not Applicable	
^{Zip} 3 ≥	668 Country U.S.	Country			6. CERTIFICAT	CATE OF STATUS DESIRED				
7. Names	and Street Addresses of Each Officer and	or Director (Fi	orida nonprof						the extractions are	
Title(s) Name of Officers and/or Directors			Street Address of Each: Officer and/or Director GO NOT Use Post Office Box Numb			Ti If Numberet	City / State / Zip			
PD	BUEHLER, WILLAM L	LUAM L		5100 NW 25TH STREET			MARGATE FT			
	_		505	1 SE	117	AUE	MORRISTON	F	7 3246	
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	8. Name and Address of Current	No	9. Name and Address of New Registered Agent							
BUEHLER, WILLIAM L										
5100 N.W. COTH STREET					Street Address (P.O. Box Number is Not Acceptable)					
MARGATE FL 2008					Suite, Apt. #, Etc.					
SOSI SE 117 AUE				Cit	על		State	ZφC	ode	
MORRISTON, FL 32668					•		FL		, <u>,</u>	
	g appointed the registered agent of the ab	ove named con	secution, am t	amiliar with an	accept the c	obligations of Sec	tion 607.0505, F.S.		C : "30"	
Signature of Registered	Agent Agent	EGISTERED A	wit		KEL		Date	90	2	
			GENT MUST				<u> </u>			
	Des this corporation pay a Ppt. of Revenue under S.				s. Yes	M No [(See other side on intang			
this rei	y that I am an officer or director or the reconstatement application, the reason for diss by the corporation have been paid and the application is true and accurate, and my s	olution has bee roll to seman	n eliminated, iduais listed c	the corporate in this form do	name satisfie: not quality for	s the requirement r an exemption u	is of section 607.0401 or 617.048	01. F.S	that all fees	
	11/20 and	20	11	\$ \$ 2 7 TO \$"	;;			, i		
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