

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6384

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-0821
Fax Number : (850) 558-1515

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**CORPORATION REINSTATEMENT
SOUND REFRIGERATION & AIR CONDITIONING, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$1,950.00

Electronic Filing Menu

Corporate Filing Menu

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12 APR -2 PM 3:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDACORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F97000002728

1. Corporation Name

Sound Refrigeration & Air Conditioning, Inc.

2. Principal Office Address - No P.O. Box #

58 Old Stewart Ave

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Garden City Park, NY

City & State

Zip

Country

Zip

Country

11040

CR2E081 (11/10)

4. Date Incorporated or Qualified
To Do Business in Florida

05/22/1997

5. FEI Number

131844141

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

REINSTATEMENT

APR -2 2012

R. HUNT

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0506 or 617.0503, F.S.

Signature of
Registered Agent*Becky Peirce*Becky Peirce
Assistant Vice President

Date 04/02/2012

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
Pres	Steven Marcantis	32 Woodland Lane	Old Brookville, NY 11545
Sec	Robert Gulmi	6 Wagon Drive	Woodbury, NY 11797
VP	Richard Stankiewicz	304 Bowen Road	Waitsfield, VT 05673

10. E-mail Address: SBertoline@soundac.com

(To be used for future annual report notification)

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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted by a document to the Department of State constitutes a third degree felony as provided for in s 617.155, F.S.

SIGNATURE:

Steven Marcantis

Steven Marcantis 03-28-12

516-747-5678

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #