

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

07 JUL 10 PM 12:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

800106341968  
07/18/07--01041--014 \*\*1208.75

CR2E081 (1/07)

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # F98000002261**

1. Corporation Name

**Powerplant Maintenance Specialists, Inc.**

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

**2610 Masters Blvd.**

Suite, Apt. #, etc.

3. Mailing Office Address

**2900 Bristol Street**

Suite, Apt. #, etc.

**Suite #H202**

City & State

**Navarre, FL**

City & State

**Costa Mesa**

Zip

**32566**

Country

**USA**

Zip

**CA**

Country

**USA**

4. Date Incorporated or Qualified  
To Do Business in Florida

**10/01/04**

5. FEEL Number

**330602214**

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

**CT Corporation System**

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

**1200 South Pine Island Road**

Suite, Apt. #, Etc.

City

**Plantation**

State

**FL**

Zip Code

**33324**

☐ The reinstatement fee is imposed, except in  
circumstances which the entity did not receive  
the prior notices. By checking this box, you  
are certifying the prior notices were not  
received and requesting the reinstatement  
fee be waived.

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

Date

*July 5, 2007*

**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/Sec	James D. McEachern	2900 Bristol Street, Suite H202	Costa Mesa, CA 92626
CFO	James D. McEachern	2900 Bristol Street, Suite H202	Costa Mesa, CA 92626
Director	James D. McEachern	2900 Bristol Street, Suite H202	Costa Mesa, CA 92626
V.P.	Michael Smith	2610 Masters Blvd.	Navarre, FL 32566

REINSTATEMENT 6-2-07

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 contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

*7-2-07*

714-427-6900

Daytime Phone #

LAW OFFICES OF  
**ROBERT L. BACHMAN**

CALIFORNIA OFFICE  
THE ATRIUM  
19100 VON KARMAN AVENUE, SUITE 380  
IRVINE, CALIFORNIA 92612  
TELEPHONE: (949) 955-0221  
FAX: (949) 955-0324

REPLY TO:  
☒ CALIFORNIA OFFICE  
☐ NEVADA OFFICE

NEVADA OFFICE  
3431 E. SUNSET ROAD,  
BUILDING C, SUITE 12  
LAS VEGAS, NEVADA 89120  
TELEPHONE: (702) 456-9347  
FAX: (702) 456-9346

July 6, 2007

**VIA OVERNIGHT COURIER**

Department of State Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**RE: PMSI Southeast Inc. and Powerplant Maintenance Specialists Inc.**  
**Our File No.: 2383-1 and 2383-11**

Dear Gentlemen:

Enclosed please find an original and two copies of Corporation Reinstatements for Powerplant Maintenance Specialists, Inc. and PMSI Southeast, Inc. as well as two checks in the amount of \$1093.75 for PMSI Southeast Inc and \$1,208.75 for Powerplant Maintenance Specialists, Inc. Both checks include the additional \$8.75 for a Certificate of Status.

Please process the reinstatements and provide the undersigned the required documents to show that the reinstatements have been processed. A self addressed and stamped envelope has been included for that purpose.

Thank you.

Very truly yours,

ROBERT L. BACHMAN

RLB/hz

Enclosures (Check No. 008898, \$1208.75; Check No. 008899, \$1093.75)