

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 OCT 28 AM 8:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G60041**

1. Corporation Name

SEA-AIR MECHANICAL, INC.

Principal Place of Business

3922 N.W. 32ND AVENUE
MIAMI FL 33142-5010

Mailing Address

3922 N.W. 32ND AVENUE
MIAMI FL 33142-5010

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



2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

09/14/1983

5. FEI Number

59-23347-18

Applied For

Not Applicable

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
PS	DZWONKIEWICZ, RICHARD V.	3922 N.W. 32ND AVENUE	MIAMI FL 33142

700008638487
10/28/02--01133--019 **150.00

8. Name and Address of Current Registered Agent

DZWONKIEWICZ, RICHARD V.
3922 N.W. 32ND AVENUE
MIAMI FL 33142

9. Name and Address of New Registered Agent

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

CR2E040 (8/02)

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. or 617.0505, F.S.

Signature of Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date

10/22/02

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] PRESIDENT
Richard V. Dzwonkiewicz 10/22/02 305-638-9447
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Sea-Air
Mechanical, Inc.

3922 N.W. 32nd Ave.
Miami, Florida 33142

PHONE: (305) 638-9417
FAX: (305) 635-9786

October 23, 2002

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fla. 32314

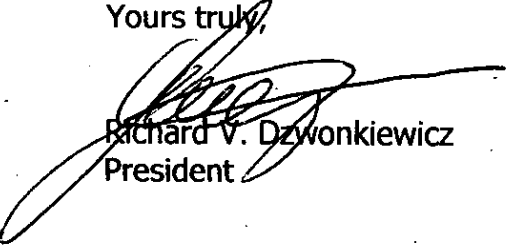
Re: Sea-Air Mechanical, Inc.
#59-2334718

Gentlemen;

Please be advised that we never received the 2-prior UBR notices.

Enclosed is the UBR reinstatement application as well as our \$150.00.

Yours truly,


Richard V. Dzwonkiewicz
President