

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M51085**

1. Corporation Name

ELECTRONICS BY ALEX, INC.

Principal Place of Business

**6592 TAFT ST.
1055 N.E. 210 TERRACE
HOLLYWOOD FL 33024
US**

Mailing Address

**% GUARANTEED ELECTRONICS SVC.
6592 TAFT ST
HOLLYWOOD FL 33024
US**

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/28/1987

5. FEI Number

65-0027408

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P	CARVAJAL, ALEXANDER	9468 SW 52ND CT.	COOPER CITY FL
VS	CARVAJAL, LINA T	9468 S.W. 52ND CT.	COOPER CITY FL

3000002545843--8

-06/03/98--01041--015

****900.00 ****300.00

REINSTATEMENT

8. Name and Address of Current Registered Agent

**CARVAJAL, ALEXANDER
9468 SW 52ND CT.
COOPER CITY FL 33328**

9. Name and Address of New Registered Agent

Name

James LeFtis

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

6950 Lee Street

Suite, Apt. #, Etc.

City

Hollywood

State

FL

Zip Code

33024

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

James LeFtis

(IF REGISTERED AGENT MUST SIGN)

Date

12/31/97

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information
on Intangible tax.)

12. 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)(f), 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:

Alex Carvajal

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/31/97

Date

954-983-4982

Daytime Phone #

CR2040 (8/97)