

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
~~Matthew J. Levine~~  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 JAN 28 AM 9:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000044013

Corporation Name

G.M. Electric Inc

100011129101  
01/28/03--01040--020 \*\*150.00

Principal Office Address		3. Mailing Office Address	
25200 SW 189 Ave		25200 SW 189 Ave	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Homestead Fla		Homestead Fla	
Zip	Country	Zip	Country
33031		33031	

4. Date Incorporated or Qualified To Do Business in Florida	
5-02-01	
5. FEI Number	Applied For
65-1108522	Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	
\$8.75 Additional Fee required for a Certificate of Status	

**7. Name and Address of Current Registered Agent**

Name		
Thomas J. McLaughlin		
Street Address (P.O. Box Number is Not Acceptable)		
25200 SW 189 Ave		
Suite, Apt. #, Etc.		
City		
Homestead Fla		
State	Zip Code	
FL	33031	

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 Thomas J. McLaughlin Date 12-08-02  
REGISTERED AGENT MUST SIGN

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
P	MARGARET A McDaniel	25200 SW 189 Ave	MIAMI, FL 33031
STD	GILBERT McDaniel Jr.	25200 SW 189 Ave	MIAMI, FL 33031

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.

GILBERT McDaniel Jr.

SIGNATURE: Gilbert McDaniel Jr. VSTD Date 12-10-02 786-367-3854  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E081 (9/01)

G.M. ELECTRIC, INC.  
Electrical Contracting



13015 S.W. 89 Place # 211 • Miami, FL 33176  
Office: (305) 246-4393 • Fax: (305) 246-8842

12-10-02

Fla Dept. of State  
Division of Corporations  
409 F. Gaines Street  
TALLAHASSEE, FL 32399

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To whom it may concern

G.M. Electric Corporation has been dissolved, because we did not receive paperwork from Tallahassee for renewal. Enclosed is a check for \$150.00 to reinstate G.M. Electric INC. Please process as soon as possible. Any questions please call 786.367.3854.

Thanks

Glenn Pondichy