

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000017252

**FILED**  
**Oct 04, 2011**  
**Secretary of State**

**Entity Name:** MECHANICAL DESIGN AND CONSULTING, INC.

**Current Principal Place of Business:**

897 14TH AVENUE S.  
SAFETY HARBOR, FL 34695

**New Principal Place of Business:**

897 14TH AVENUE SOUTH  
SAFETY HARBOR, FL 34695

**Current Mailing Address:**

897 14TH AVENUE S.  
SAFETY HARBOR, FL 34695

**New Mailing Address:**

**FEI Number:** 01-0649798      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FERRARO, THOMAS A  
897 14TH AVENUE SOUTH  
SAFETY HARBOR, FL 34695      US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** THOMAS A. FERRARO

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** FERRARO, THOMAS A  
**Address:** 897 14TH AVENUE SOUTH  
**City-St-Zip:** SAFETY HARBOR, FL 33695

**Title:** VP  
**Name:** DEAN, DENNIS  
**Address:** 897 14TH AVENUE S.  
**City-St-Zip:** SAFETY HARBOR, FL 34695

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** THOMAS A. FERRARO

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

10/04/2011

\_\_\_\_\_  
Date