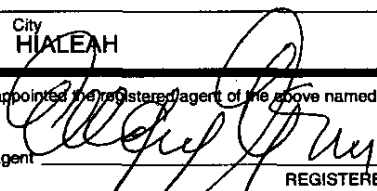
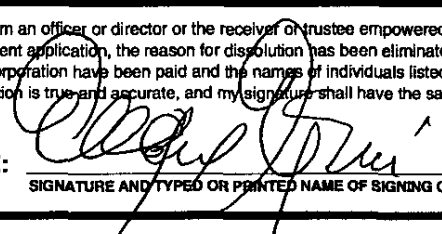


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P02000033768			
1. Corporation Name A.G.C. ELECTRIC & RECYCLING CONTRACTOR, INC.			
2. Principal Office Address 2620 WEST 79 STREET Suite, Apt. #, etc.		3. Mailing Office Address SAME Suite, Apt. #, etc.	
City & State HIALEAH, FLORIDA		City & State	
Zip 33016	Country USA	Zip	Country
		4. Date Incorporated or Qualified To Do Business in Florida 03-27-2002	
		5. FEI Number ☒ 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 ENRIQUE GUZMAN			
Street Address (P.O. Box Number is Not Acceptable) 2660 WEST 79 STREET			
Suite, Apt. #, Etc.			
City HIALEAH		State FL	Zip Code 33016
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 		Date 02-03-2004	
REGISTERED AGENT MUST SIGN			
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
PD	ENRIQUE GUZMAN	14780 SW 98 AVE	MIAMI, FL 33176
VD	HECTOR CABRERA	6860 SW 35 STREET	MIAMI, FL 33155
D	ORLANDO LLINAS	2290 SW 11 STREET	MIAMI, FL 33135
D	JOSE M. GARCIA	4737 SW 5 TERRACE	MIAMI, FL 33134
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 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: 		02-03-2004	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #

FILED
04 FEB -4 AM 9:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03-04

CR2E081 (01/04)

TO: DIVISION OF CORPORATION,
P.O. BOX 6327
TALLAHASSEE, FL 32314

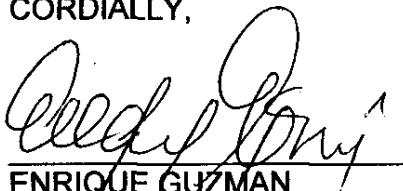
TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

WE DID NOT RECEIVE THE UNIFORM BUSINESS REPORT FOR 2003, 2004. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT US.

CORDIALLY,


ENRIQUE GUZMAN
PRESIDENT

*I had sent this last year but realize
that it never got processed.*

*Please have this done as soon as
possible.*