## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT			FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS				FILED  04 NOV 22 PM 1: 16  SECRETARY OF STATE  SECRETARY OF STATE					
DOCUMENT # PO 20000 85565 1. Corporation Name BAMBINO'S ELECTRIC CORP.									SECRE	HASSEE,	FLORIDA	
2 Principal Office Address 13452 Sw 11 TERR Suite, Apt. #, etc.				3. Mailing Office Address 12452 SW 11 TERR Suite, Apt. #, etc.				)FINSTITUTE 03-04				
City & State  VIVA LAHES, F1.  Zip Country  33184 9ADE				City & State  VILLA LALLS Fl.  Zip Country  33184 DADR				4. Date Incorporated or Qualified To Do Business in Florida AUS ON JOO2  5. FEI Number Applied For S6-2 J85 U95 Nor Applied For Nor Applicable  6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status				
Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  124525w11fe.  Suite, Apt. #, Etc.  City  State  Stat												
	and Street Ad	dresses of Eac		Vor Director (Flo	rida nonpro		ns must list at le					
Titles	Officers and/or Directors			<b>204</b> C	נוסי		and/or Director	<u> </u>	Vrual Albs F1.3318V			
10	MORELLA MORENE			12452 Gull HER				> 4				
+	AJ. GARCIA				24990 gu 126 ct				Princeton, Fl.			
5	EVMELIA MODERO 8440 SU 157PL, MIAMI, C. 33197 500042931435)								1 <i>97</i> 500.00			
					)		<del></del>	A	<u>((.6.) U7</u>			
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 filling 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Date  Date												