

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

07 FEB 27 PM 12:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000113527

1. Corporation Name

MIRCE AIR CONDITIONING & REFRIGERATION INC

Principal Place of Business

Mailing Address

7305 SW 128 CT  
MIAMI FL 33183

7305 SW 128 CT  
MIAMI FL 33183

300091015413  
03/06/07--01026--019 \*\*300.00

REINSTATEMENT

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

10/22/2002

5. FEI Number

81-0575722

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
PRES	RICARDO ALOMA	7305 SW 128 CT	MIAMI FL 33183

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

RICARDO ALOMA  
7305 SW 128 CT.  
MIAMI FL. 33183

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

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

REGISTERED AGENT MUST SIGN

Date 2/26/07

11. Does this corporation pay any intangible tax to the  
Dept. of Revenue under S. 199.032, Florida Statutes. 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)(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

RICARDO ALOMA (PRES)

2/26/07

Date

(786) 683-7377

Daytime Phone #

**MRCC AIR CONDITIONING & REFRIGERATION, INC.**  
**18710 SW 107 AVE, SUITE 24**  
**MIAMI, FLORIDA 33157**

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February 26, 2007

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Division of Corporation  
Uniform Business Report  
P.O. Box 1500  
Tallahassee, Fl 32302-1500

Gentlemen:

This letter is to inform you that we never received the original forms for Annual Report to be file before May 1<sup>st</sup>, 2006 and neither the Note of Dissolution, because on the first months of year 2006 we change the accounting firm of the corporation and when they realize that we did not make the payment on time they ask us if we did not receive the first notice before May 1<sup>st</sup>, 2006 and the notice of dissolution or revocation and to our knowledge we never receipt those notices, we assume that the documents were lost in the mail. I will appreciate if you accept our check in the amount of \$ 300.00 as payment for the Annual Reports for year 2006 and 2007.

I thank you for your cooperation to resolve this matter.

Sincerely your:

  
Ricardo Aloma  
President