

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAR 20 PM 2:37

DOCUMENT # P04000004889

1. Corporation Name

BUTCH VIDAL ELECTRIC, INC.

2. Principal Office Address

8805 AUBURN WAY

3. Mailing Office Address

8805 AUBURN WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMPA FL

City & State

TAMPA FL

Zip

33615

Country

HILLSBOROUGH

Zip

33615

Country

HILLSBOROUGH

REINSTATEMENT 04-00

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

20-0571011

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

HENRY BUTCH VIDAL

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

8805 AUBURN WAY

Suite, Apt. #, Etc.

City

TAMPA

State

FL

Zip Code

33615

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

H. B. Vidal

Date 03/16/2006

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
D/P	HENRY BUTCH VIDAL	8805 AUBURN WAY	TAMPA, FL 33615

300069060253
03/30/06--01054--019 **450.00

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:

H. B. Vidal

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/16/2006

Date

(813) 886-3900

Daytime Phone #

CR2E081 (10/02)

2 of 2

Contractors Reporting Service, Inc.

2001 W Busch Blvd Ste A

Tampa, FL 33612

813-932-5244 or 1-800-487-2084

Fax 813-932-3782

Florida Department of State
Division of Corporations

March 16, 2006

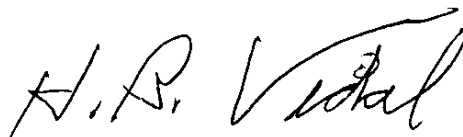
To Whom It May Concern,

Mr. Vidal Did not receive his renewals for the corporation Butch Vidal Electric, Inc.
Please accept this letter and his payment for the past 3 years of Annual Report fees in the amount of \$450.00.

If you should have any questions regarding this issue, please feel free to contact my office at any time.

Thank you for your prompt attention to this matter.

Sincerely,



Henry butch Vidal
President
Butch Vidal Electric, Inc.