2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000038461

City-St-Zip:

PLANT CITY, FL 33563

FILED Mar 21, 2006 Secretary of State

Entity Nar	ne: DCL ELE	ECTRICAL SERVICES, INC.			
Current P	rincipal Place	e of Business:	New Principal Place o	f Business:	
	R. M.L. KING J TY, FL 33563	R. BLVD.			
Current M	ailing Addre	ss:	New Mailing Address:		
902 W. DR. M.L. KING JR. BLVD. PLANT CITY, FL 33563					
FEI Number:	20-0832988	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
SOSS, MARC J 902 W. DR. M.L. KING JR. BLVD. PLANT CITY, FL 33563 US			902 W. DR. M.L. KING (SHOFFSTALL, CARL J 902 W. DR. M.L. KING JR. BLVD. PLANT CITY, FL 33563 US	
The above in the State	named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE: CARL SHOFFSTALL				03/21/2006	
	Electro	nic Signature of Registered A	gent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SHOFFSTALL,	L. KING JR. BLVD.	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	SHOFFSTALL,	L. KING JR. BLVD.	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	REIS, CHARLE) Delete ES L. KING JR. BLVD.	Title: (Name: Address:) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

City-St-Zip:

SIGNATURE: CARL SHOFFSTALL D 03/21/2006