2005 FOR PROFIT CORPORATION

REINSTATEMENT						
DOCUMENT # P04000168001						
1. Entity Name				Eu -,		
Y & J ELECTRIC, INC.				FILE		
			100	05 DEC 16 PM	2. 57	
Principal Plac	e of Business	Mailing Address				
2410 8TH ST. N.E. 2410 8TH ST. N.E.			TALLAHASSEE, F	SIAIF		
NAPLES, FL	34120	NAPLES, FL 34120		· MELMIASSE, F	LORIDA	
2. Principal Place of Business 3. Mailing Address		C1 410				
2410 8th St NE Suite, Apt. #, etc.		2410 8 th St NE Suite, Apt. #, etc.		4		
Suite, Apt. #, etc.			10062005 REIN-P	CR2E098 (6/04)		
City & State Naples, FL		City & State Naples FL		4. FEI Number	Applied For	
Zip Country			Country		Not Applicable \$8.75 Additional	
34	120 USA	34120	ÚSA	5. Certificate of Status Desired	Fee Required	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent						
MARTINEZ, YANNIS						
2410 8TH ST. N.E.			Street Addres	Street Address (P.O. Box Number is Not Acceptable)		
NAPLES, FL 34120						
			City		FL Zip Code	
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bo						
the obligations of registered agent.						
SIGNATURE						
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algorithm required when reinstating) DATE						
FILE NOW!!! FEE IS \$750.00						
	nuary 1, 2006, Fee will be \$900.0	0				
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO O	FFICERS AND DIRECTORS IN 11	
TITLE	PD	☐ Detete	TITLE	# # # * * _ * * _ * _ *	Change Addition	
NAME	MARTINEZ, YANNIS		NAME STREET ADDRESS	9000623 12/21/0501044	:adia 4 iaia - 000 - adan 00	
STREET ADDRESS CITY-ST-ZIP	2410 8TH ST. N.E. NAPLES, FL. 34120		CITY-ST-ZIP	10101100 01044	T 000 YEAR 30, UE	
TITLE	1	☐ Delete	TITLE		☐ Change ☐ Addition	
NAME	10,1		NAME			
STREET ADDRESS	H112/19		STREET ADDRESS CITY-ST-ZIP			
CITY+ST+ZIP		□ Poleto	TITLE		☐ Change ☐ Addition	
TITLE NAME		Delete	_NAME			
STREET ADDRESS			STREET ADDRESS		•	
CITY+ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE NAME		☐ Change ☐ Addition	
NAME STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Defete	TITLE		☐ Change ☐ Addition	
NAME			NAME CYRCET ADDRESS			
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		:	
TITLE		Delete	TITLE		☐ Change ☐ Addition	
NAME		C Delete	NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
	cortify that the information supplied with	Aller Colonia aleren eta eta esta de esta	a avametic constitution	Conting 110 07/3\/3 Finalist Ct-6-4-	e I further certify that the information	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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