

2006 FOR PROFIT CORPORATION REINSTATEMENT

APPROVED
AND
FILED


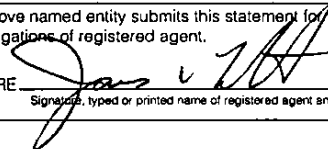
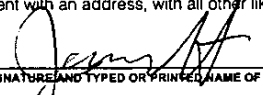
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

log 2



11022006 REIN-P CR2E098 (11/05)

DOCUMENT # P05000159448					
1. Entity Name TIMCO ELECTRICAL CONTRACTORS, INC.					
Principal Place of Business 3308 ALLAMANDA CT KISSIMMEE, FL 34746			Mailing Address 3308 ALLAMANDA CT KISSIMMEE, FL 34746		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number	
				Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
TRITTO, JAMES V 3308 ALLAMANDA CT KISSIMMEE, FL 34746			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			800081984858		
			City 11/21/06--01036--001 FL Zip Code 00		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$750.00 After January 1, 2007, Fee will be \$900.00					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRITTO, JAMES V			NAME	REINSTATEMENT
STREET ADDRESS	3308 ALLAMANDA CT			STREET ADDRESS	06 DSC
CITY-ST-ZIP	KISSIMMEE, FL 34746			CITY-ST-ZIP	
TITLE	CASBY, BILLOCK	<input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

11-7-06

Re: ...
TIMCO ELECTRICAL

DIVISIONS OF
CORPORATIONS

2082

I PLACED A PHONE CALL TO YOUR QUESTION LINE
TODAY. CAN YOU PLEASE WAIVE THE PENALTY FEE
I HAVE NOT RECEIVED NOTICES AT ANYTIME
PRIOR TO THE ENCLOSED DOCUMENT P05000159448,
PLEASE ACCEPT MY CHECK FOR \$150.00 TO
MAKE PAYMENT.

THANK YOU

JAMES V. TRITTO

James V. Tritto

JAMES V. TRITTO
3308 ALLAMANDA ST
KISS, RI 04746