

**2007 FOR PROFIT CORPORATION
REINSTATEMENT**

DOCUMENT # P06000125994

1. Entity Name
RCD ELECTRIC, INC.



Principal Place of Business
187 EDGEWATER CIRCLE
SANFORD, FL 32773 US

Mailing Address
187 EDGEWATER CIRCLE
SANFORD, FL 32773 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

DEFAZIO, RICHARD C
187 EDGEWATER CIR
SANFORD, FL 32773

Name

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

City

FL Zip Code

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

Richard DeFazio

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

10-27-01

**FILE NOW!!! FEE IS \$750.00
After January 1, 2008, Fee will be \$900.00**

10. OFFICERS AND DIRECTORS

TITLE P Delete
NAME DEFAZIO, RICHARD C
STREET ADDRESS 187 EDGEWATER CIR
CITY-ST-ZIP SANFORD, FL 32773

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Change Addition
600112439736
11/20/07--01007--016 **750.00

TITLE VP Delete
NAME DEFAZIO, RICHARD C
STREET ADDRESS 187 EDGEWATER CIR
CITY-ST-ZIP SANFORD, FL 32773

Delete

Change Addition

TITLE S Delete
NAME DEFAZIO, RICHARD C
STREET ADDRESS 187 EDGEWATER CIR
CITY-ST-ZIP SANFORD, FL 32773

Delete

Change Addition

TITLE T Delete
NAME DEFAZIO, RICHARD C
STREET ADDRESS 187 EDGEWATER CIR
CITY-ST-ZIP SANFORD, FL 32773

Delete

Change Addition

Delete

Change Addition

Delete

Change Addition

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: *Richard DeFazio*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-27-01

407 9355209

Date

Daytime Phone #

**FILED
Nov 16, 2007 8:00 A.M.
Secretary of State**

11-26-07 28



REINSTATEMENT

10-27-01 REINSTATEMENT CP2008 6/07
01-0879107 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required