

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 617-6384

From:
Account Name : CORPORATION SERVICE COMPANY
Account Number : I200000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

Kimberly K2949

CORPORATION REINSTATEMENT

ANGELO LIGHTING COMPANY

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$1,808.75

RH

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Corporate Filing Menu

Help

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

09 JUN 25 AM 8:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P06106

1. Corporation Name

Angelo Lighting Company

2. Principal Office Address - No P.O. Box #
12401 McNulty Road

Suite, Apt. #, etc.

City & State
Philadelphia, PAZip
19154Country
USA3. Mailing Office Address
12401 McNulty Road

Suite, Apt. #, etc.

City & State
Philadelphia, PAZip
19154Country
USA4. Date Incorporated or Qualified
To Do Business in Florida 5/20/855. FGI Number
23-2250464Applied For
Not Applicable6. CERTIFICATE OF STATUS DESIRED ☒ \$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Glenn BeckStreet Address (P.O. Box Number is Not Acceptable)
2000 Lewis Industrial Drive

Suite, Apt. #, Etc.

City
JacksonvilleState
FLZip Code
32205

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.

Signature of
Registered Agent

Date 6-22-09

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
PRES	Stanley Angelo	12401 McNulty Road	Philadelphia, PA 19154
VP TR	Raymond Angelo	12401 McNulty Road	Philadelphia, PA 19154
VP SE	John Angelo	12401 McNulty Road	Philadelphia, PA 19154
DIR	Stanley Angelo	12401 McNulty Road	Philadelphia, PA 19154
DIR	Raymond Angelo	12401 McNulty Road	Philadelphia, PA 19154
DIR	John Angelo	12401 McNulty Road	Philadelphia, PA 19154

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 contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/19/09

Date

215-671-2000

Daytime Phone

RH