2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 04, 2009
Secretary of State

DOCUMENT# P08000072250

Entity Name: GALAXY ELECTRICAL CONTRACTORS CORP.

Current Principal Place of Business:

535 109TH AVE. NORTH
NAPLES, FL 34108 US

New Principal Place of Business:

Current Mailing Address:

535 109TH AVE. NORTH
NAPLES, FL 34108 US

New Mailing Address:

FEI Number: 65-0127023 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZWERIN, JEFF
535 109TH AVE. NORTH
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

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.

SIGNATURE: JEFF ZWERIN

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: ZWERIN, JEFF
Address: 535 109TH AVE. NORTH
City-St-Zip: NAPLES, FL 34108 US

Title: VD ( ) Delete
Name: RIVERA, EDDIE
Address: 535 109TH AVE. NORTH
City-St-Zip: NAPLES, FL 34108 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: EDDIE RIVERA VD 11/04/2009

Electronic Signature of Signing Officer or Director — Date