

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
 FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

99 JAN -4 AM 8:53

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # P 93 0000 50764

1. Corporation Name

A1 COMMUNICATIONS AND ELECTRONICS INC.

Principal Place of Business

Mailing Address

410 E HALLANDALE BEACH BLVD
 HALLANDALE FL 33009

410 E HALLANDALE BEACH BLVD
 HALLANDALE FL 33009

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

7 13 93

5. FEI Number

59-3192892

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
DPST	LANDAU RONALD	410 E HALLANDALE BEACH BLVD	HALLANDALE FL 33009

7000002735927--5
 -01/11/99--01011--020
 ****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LANDAU, RONALD
 410 E HALLANDALE BEACH BLVD
 HALLANDALE FL 33009

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

Ronald Landau

Date 12 30 98

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☐

No ☒

(See other side for information on intangible tax.)

12. 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 under section 119.07(3)(i), 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:

Ronald Landau

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12 30 98

Date

954 4589852

Daytime Phone #

CR2040 (1/98)

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

THIS IS A COPY OF THE ORIGINAL ANNUAL REPORT ALONG WITH A MONEY ORDER PAYMENT THAT WAS SENT TO YOU. YOU INDICATED WHEN CALLED THAT THEY WERE RETURNED UNFORTUNATELY TO DATE THEY HAVE NEVER COME BACK TO US. THEREFORE YOU ASKED A LETTER BE WRITTEN ALONG WITH A RESTATEMENT FORM BE SENT TO YOU IN ORDER TO ELIMINATE THE PENALTY. cordially yours AND
Ronald Landau

DO NOT WRITE IN THIS SPACE. PRES PER

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Martham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P93 000050764 1. Corporation Name A-L COMMUNICATIONS AND ELECTRONICS INC.			
Principal Place of Business 410 E HALLANDALE BEACH BLVD HALLANDALE FL 33009		Mailing Address 410 E HALLANDALE BEACH BLVD HALLANDALE FL 33009	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.	
22 City & State		27 City & State	
23 Zip		28 Zip	
24 Country		29 Country	
25		30	
9. Name and Address of Current Registered Agent LANDAU, RONALD 410 E HALLANDALE BEACH BLVD HALLANDALE FL 33009		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85 FL		86 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE: RONALD LANDAU DATE: 6/10/98 (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	
21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP		21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	
31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP		31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	
41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	
51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	
61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	
14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 12 or Block 13 if changed or on an attachment with an address.			
SIGNATURE: RONALD LANDAU PRES DATE: 6/10/98 4544589854 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

CR2E034 (10/97)