PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

07 FEB 15 PM 2:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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02/19/07--01006--018 **1665.00

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000008861

1. Corporation Name

Electrical Resource & Service, Inc

W07-6137

REINSTATEMENT 97-07
CR2E081 (1/07)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
7328 Tropical Drive	same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Spring Hill, FL	City & State:
Zip: 34607 Country: Hernando	Zip: Country:

4. Date Incorporated or Qualified To Do Business in Florida: 1/29/96

5. FEI Number: 59-3358392 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: James Janecek

Street Address (P.O. Box Number is Not Acceptable): 7328 Tropical Drive

Suite, Apt. #, Etc.:

City: Spring Hill State: FL Zip Code: 34607

☑ 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 617.0503, F.S.

Signature of Registered Agent: James J. Janecek REGISTERED AGENT MUST SIGN Date: 2/1/07

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	James Janecek	7328 Tropical Drive	Spring Hill, FL 34607

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: JAMES J. JANECEK James J. Janecek 2/1/07 352 597 8910
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

K. Eckel FEB 16 2007