	PLEASE R	EAD ALL INST	RUCTIONS	BEFORE C	OMPLET	ING THIS FORM		
ĄPF	LICATION	FLOP	DEPARTM	OF STE				
FOR Selectory State								
DOCUMENT # P96000097966					98 NOV 23 AM 11: 14			
1. Corporation Name					98 MUY 23 MITT			
M ELECTRIC CORP.					SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business Mailing Address							7814 1981P 1841	
11790 SW 11 MIAMI FL 33	8 ST., STE, 509 1775		11790 SW 18 ST., STE, 509 MIAMI FL 33175					
if above ad	dresses are incorrect in any wa	u lina through incorract in	formation and enter	correction below	†			
	cipal Office Address, If Applicab		iling Office Address, If Applicable		Date Incorporated or Qualified To Do Business in Florida To Do Business In Florida			
Suite, Apt. #	, etc.	Suite, Apt. #,	etc.		5. FEI Number Applied For			
City & State		City & State			6.	65-0711402	Not Applicable	
Zip Country Z		Zip	Countr	у	6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status			
7. Names a	nd Street Addresses of Each Off					7		
Title(s)	Name of Officers e(s) and/or Directors 2 3 (Do No			eet Address of Each ficer and/or Director e Post Office Box Nu		. City / :	State / Zip	
PIS	RODRIGUEZ, MARIO A 11790 SW 18			., STE. 509		MIAMI FL 33175		

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				·				
				3000027038931 -12/04/9801107025 ****150.00 *****150.00 -				
				1 .		*****100.UL	1 *************************************	
			B-11	125/98	: AR			
	8. Name and Address of	Current Registered Age	nt	9. Name and Address of New Registered Agent Name				
	GUEZ, MARIO A			Street Address (P.O. Box Number is Not Acceptable)				
	SW 18 ST., STE. 509 FL 33175				Suite, Apt. #, Etc.			
33.13				City State Zip Code				
10. I, being	appointed the registered agent of	The above named corpo	ration, am familiar w	th and accept the ob	oligations of Secti	on 607.0505, F.S.		
Signature of Registered A	Agent	TURE REGISTERED AG		JIRED		Date 11/17/9	·/	
11. This corporation dwes or has paid the current year Intangible Personal Property tax due June 30. Yes No								
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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #								

M Electric Corp. 11790 South West 18 Street Suite 509 Miami, Florida 33175

November 17, 1998

Document Number P9600007966 EIN 65-0711402

Division of Corporations Annual Report/Reinstatement Section PO Box 6327 Tallahassee, Florida 32314-6327

To whom it may concern:

I am writing to you as per our conversation over the telephone on November 17, 1998. We never received the annual report for my corporation. I am sending the annual report with the check for \$150.00 as per our telephone conversation. Your prompt attention in this matter will be gratefully appreciated.

Very Truly Yours,

Mario A. Rodriguez President