

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 NOV 18 AM 11:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P98000106957

1. Corporation Name

A & B Electric & Air Conditioning Inc

2. Principal Office Address

5542 Emerald Ridge Blvd

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lakeland Fla

City & State

Lakeland Fla

Zip

33813

Country

USA

Zip

33813

Country

USA

~~700043300007~~  
~~12/09/04--01026--003 \*\*2735.25~~

**REINSTATEMENT**

4. Date Incorporated or Qualified  
To Do Business in Florida

12/28/98

5. FEI Number

59-3601620

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

Charles D. Straughn

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

5542 Emerald Ridge Blvd

Suite, Apt. #, Etc.

Lakeland

City

Lakeland

~~700043300007~~

~~12/09/04--01026--003 \*\*608.75~~

State

FL

Zip Code

33813

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

Charles D. Straughn

Date 11/18/04

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	<u>Charles D Straughn SR</u>	<u>5542 Emerald Ridge Blvd</u>	<u>Lakeland Fla</u>
V.P.	<u>Charles D Straughn JR</u>	<u>2033 Edgewood Dr Suite 345</u>	<u>Lakeland Fla</u>
Sect.	<u>Janet H Straughn</u>	<u>5542 Emerald Ridge Blvd</u>	<u>Lakeland Fla</u>

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 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:

Charles D. Straughn  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/18/04

Daytime Phone #

813-9449487

23

16 W Home at May Concain  
State of Fla Division of Corporations

2082

I would like to re instate my  
A & B Electric & Air Conditioning corporation  
I did not receive any papers from State of  
Fla involving anything as far as this corporation  
in 9/7/2008 or at any other time

1 thanks

Charles D Stranglin  
5542 Emerald Ridge Blvd  
Lakeland Fla 33813  
Phone # 863-944-9487