

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P99000100755			
1. Entity Name ELECSERVICES, INC.			
Principal Place of Business 14505 COMMERCE WAY 530 MIAMI LAKES, FL 33016		Mailing Address 18520 NW 67TH AVE # 247 MIAMI, FL 33015-3302	
2. Principal Place of Business		3. Mailing Address 14505 Commerce Way	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 530	
City & State		City & State Miami, Lakes, FL 33016	
Zip	Country	Zip	Country
33016		33016	DAde
4. FEI Number 65-0963465		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒		Additional Fee Required \$8.75	
6. Name and Address of Current Registered Agent			
MONZON, LEONARDO 14505 COMMERCE WAY MIAMI LAKES, FL 33015			
7. Name and Address of New Registered Agent			
Name			
Street Address (P.O. Box Number is Not Acceptable)			
City			
State FL Zip Code			
8. The above named entity submits this statement for the purpose of obtaining a registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the collection of the stated agent.			
SIGNATURE		DATE 12-7-04	
FILE NOW!! FEE IS \$150.00 After January 1, 2005, Fee will be \$300.00		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	DCED	TITLE	Vice President / (DVP)
NAME	MONZON, LEONARDO	NAME	Leonardo D. monzon
STREET ADDRESS	1550 W. 44TH PL. RE-004	STREET ADDRESS	7564 NW 177th St
CITY- ST- ZIP	HIALEAH, FL 33012	CITY- ST- ZIP	MIAMI, FL 33015
TITLE	DDP	TITLE	
NAME	BLANCO, ROBERT	NAME	
STREET ADDRESS	7330 PINE VALLEY DR	STREET ADDRESS	
CITY- ST- ZIP	HIALEAH, FL 33015	CITY- ST- ZIP	
TITLE	DDVP	TITLE	
NAME	RIVAS, CARLOS	NAME	
STREET ADDRESS	304 SW 185 WAY	STREET ADDRESS	
CITY- ST- ZIP	PEMBROKE PINES, FL 33029	CITY- ST- ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an affidavit, with all other like empowered.			
SIGNATURE: Robert Blanco		DATE: 12-7-04	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Typed Name	

FILED

04 DEC 20 PM 12:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



12032004 REIN-P CR2E098 (8/04)

ELECSERVICES, INC.
14505 COMMERCE WAY
STE. #530-
MIAMI LAKES, FL. 33016

December 03, 2004

Division of Corporations
Annual Report Section
P.O. Box 6327
Tallahassee, FL 32314

REF: **ELECSERVICES, INC.**
Tax I.D. #65-0963465
Document #P99000100755

Dear Sir or Madam:

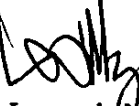
Please be advised that the above-mentioned corporation annual report was never received for timely submission.

Therefore, we are requesting that the delinquent fee be waived and that the corporation is allowed to submit a second annual report with the corresponding fee of \$150.00.

Please advise.

Your cooperation is appreciated.

Sincerely,


Leonardo Monzon
President

:mtv