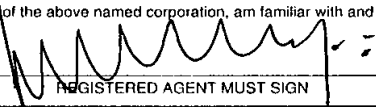
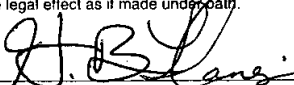


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		NOTED FILED 01 AUG 23 AM 12:00 SECRETARY OF STATE TALLAHASSEE, FLORIDA																									
DOCUMENT # P99000111137																													
1. Corporation Name DADE ELECTRIC AND ELECTRO- NIC SERVICES, INC																													
2. Principal Office Address 10845 SW 112 AVE Suite, Apt. #, etc. APT # 301 City & State MIAMI, FLORIDA Zip 33176 Country USA			3. Mailing Office Address SAME Suite, Apt. #, etc. City & State Zip Country																										
			4. Date Incorporated or Qualified To Do Business in Florida 12-28-99																										
			5. FEI Number 65-0971755 ☒ 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 PABLO HUMBERTO LLANES																													
Street Address (P.O. Box Number is Not Acceptable) 10845 SW 112 AVE																													
Suite, Apt. #, Etc. APT # 301																													
City MIAMI, FLORIDA																													
State FL																													
Zip Code 33176																													
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  REGISTERED AGENT MUST SIGN																													
Date 8/22/01																													
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)																													
<table border="1"><thead><tr><th>Titles</th><th>Name of Officers and/or Directors</th><th>Street Address of Each Officer and/or Director</th><th>City / State / Zip</th></tr></thead><tbody><tr><td>P</td><td>PABLO H LLANES</td><td>10845 SW 112 AVE</td><td>MIAMI, FL - 33176</td></tr><tr><td>D</td><td>HUBERTO LLANES</td><td>48 NW 58 CT</td><td>MIAMI, FL - 33126</td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr></tbody></table>						Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip	P	PABLO H LLANES	10845 SW 112 AVE	MIAMI, FL - 33176	D	HUBERTO LLANES	48 NW 58 CT	MIAMI, FL - 33126												
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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: HUBERTO LLANES  8/22/01 (305) 710-1919																													
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																													

OFFICE USE ONLY (Document #)

LAZARUS CORPORATE FILING SERVICE

(Requestor's Name)

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. DADE ELECTRIC AND ELECTRONIC SERVICES
(Corporation Name) (Document #)

2. INC.
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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☐ Photocopy

☐ Certificate of Status

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☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☒	Reinstatement
☐	Trademark
☐	Other

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DIVISION OF CORPORATION

Examiner's Initials