

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

S50560

1. Corporation Name

EAST COAST ELECTRIC SERVICE CORP

2. Principal Office Address

4727 Square Lake Drive

Suite, Apt. #, etc.

3. Mailing Office Address

4727 Square Lake Drive

Suite, Apt. #, etc.

City & State

Palm Beach Gardens, FL

City & State

Palm Beach Gardens, FL

Zip

33418

Country

U.S.A.

Zip

33418

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

May 8, 1991

5. FEI Number

65-0279417

Applied For

Not Applicable

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

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-05/23/00--01039--026

***1508.75 ***1508.75

7. Name and Address of Current Registered Agent

Name

DALE L. SIBERY

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

4727 Square Lake Drive

Suite, Apt. #, Etc.

City

Palm Beach Gardens,

State
FL

Zip Code

33418

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 April 19, 2000

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
P,D	Dale L. Sibery	4727 Square Lake Drive	Palm Beach Gardens, FL 33418
V,D	Jean S. Sibery	4727 Square Lake Drive	Palm Beach Gardens, FL 33418
T,D	Tim McIntyre	4727 Square Lake Drive	Palm Beach Gardens, FL 33418

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 19, 2000 (561) 718-7521

Date

Daytime Phone #