PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

ACCEPTED AND FILED
96 NOV -1 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S 73278

1. Corporation Name
Prime Electrical Contractors Inc.

200001938672--6
-11/07/96--01021--021
****383.75 ****383.75

Principal Place of Business / Mailing Address
1609 N.W. 79th Street
Miami Florida 33147

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 96 ao
DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable	3. New Mailing Address, If Applicable
N/A	N/A
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 1991

5. FEI Number: 65 030 7793 — Applied For ☐ Not Applicable ☒

6. CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
*	Stanley Jones Dir ,President	1345 N.W. 182 Street	Miami Fl 33169
*			

8. Name and Address of Current Registered Agent

Richard Venditti
250 Bird Road
Suite 102
~~Coral Gables Fl~~

9. Name and Address of New Registered Agent

Name: Stanley Jones
Street Address (P.O. Box Number is Not Acceptable): 1345 N.W. 182 Street
Suite, Apt. #, Etc.:
City: Miami State: FL Zip Code: 33169

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Stanley Jones
REGISTERED AGENT MUST SIGN

Date: Oct 29, 1996

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: Stanley Jones Stanley Jones Dir — Oct 29, 1996 — 1-305-693-6800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E080 (12/95)