

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS				FILED 02 JUN 21 AM 8: 38					
E _	UMEN ration Name		V 06580					SECRETARY OF STATE TALLAHASSEE, FLORIDA					
FLO	DRIDA	HEAT A	AND POWI	ER, INC	•								
830	oal Office Add			3. Mailing Office Address 830 NW 57 PL				REINSTATEMENT 00-02					
Suite, Apt.	#, etc.			Suite, Apt. #, etc.				<u> </u>		-			
City & Stat	ө	-		City & State				4. Date Incorporated or Qualified To Do Business in Florida 1/13/1992					
FT. LAUDERDALE, FL. Zip Country			FT. LAUDERDALE, FL.			FL.	5. FEI Number Applied For 65 – 0 3 0 5 8 2 8 Not Applied For						
3330	9	USA	1	33309		Country USA		6. CERTIFICA	TE OF STATI	JS DESIRED	\$8.75 Addition		
				7. Nan	ne and Add	iress of Curre	nt Registere	d Agent			ioi a Geitino	ate of Status	
	FRED INGLE, JR.										-		
Street Address (P.O. Box Number is Not Acceptable)								 	-1				
	830 NW 57 PLACE Suite, Apt. #, Etc.												
	City				, .		_						
	FT. LAUDERDALE								State Zip Code FL 33309				
		e registered a	gent of the above	named obroorati	6 n, am fam	iliar with and a	cept the obl	igations of sect	ion 607.05(95 or 617.0503,	F.S.	(9/01)	
Signature of Registered		treet	- Ch	fe f	ENT MUST SIGN				Date	5/7/2	002	CRZE081 (9/01)	
9. Names	and Street A	ddroeses of E										5	
Titles	es and Street Addresses of Each Officer and/or • Name of			Porector (Florida	Street Address of Each				T				
	Officers and/or Directors		Officer and/or Director			or Director	City/State/Zip CORAL SPRINGS, FL.						
P	FRED INGLE, JR.			4110 NW 103 DRIV			DRIV	E	CORA	L SPRI	NGS, FL 33065		
								F	5013	006 0 -06/27/i ***105()7304 020105 0,00 **	15 3 6-028 *1050,10	
						- . - .							
owed by	the corporat	ion have been	tor or the receiver eason for dissolut paid and the nam ate, and my signa	es of individuals	listed on thi	is form do not q al effect as if m	ualify for an o	exemption unde ath.	pter 607 or of section 6 er section 1	617, F.S. I furth 07.0401 or 617 19.07(3)(i), F.S.	er certify that wh .0401, F.S., that The information	en filing all fees indicated	
SIGNAT	URE: 🎅	freel	- Unde	h-		ED INGI	E,JR.	5/7/	2002	954-325	5-2026	J	
	3K		TIPEU UR JIRINTE	NAME OF SIGNI	NG OFFICE	R OR DIRECTOR	•		Date	C	aylime Phone #		

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