

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 28 AM 9:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V36685**

1. Corporation Name

LUKE BROTHERS ELECTRIC, INC.

Principal Place of Business

1622 HICKMAN RD
JACKSONVILLE FL 32216
US

Mailing Address

P O BOX 17734
JACKSONVILLE FL 32245
US

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 07



000024197290
10/28/03--01023--014 **150.00

4. Date Incorporated or Qualified
To Do Business in Florida

05/18/1992

5. FEI Number

59-3128407

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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	4 City / State / Zip
P	LUKE, MICHAEL W	1622 HICKMAN RD	JACKSONVILLE FL 32216
V	LUKE, GARY L	1622 HICKMAN RD	JACKSONVILLE FL 32216

8. Name and Address of Current Registered Agent

LUKE, MICHAEL W.
1622 HICKMAN RD
JACKSONVILLE FL 32216

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

[Signature]
REGISTERED AGENT MUST SIGN

Date

10/22/03

11. 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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL LUKE 10/22/03

Date

Daytime Phone #

CR2E040 (7/03)



LUKE BROS. ELECTRIC, INC.

Commercial • Industrial • Residential

Fla. Lic. # EC0001566

P.O. Box 17734 • Jacksonville, FL 32245
Ph. (904) 725-9818 • Fax (904) 725-0256

GA Lic. # EN001579

October 22, 2003

Re: UBR Notices

To Whom It May Concern:

This letter is to inform you that this company has not received the UBR notices.

If there are any questions, please call 904-725-9818.

Thank You



Michael Luke
President