

583043

Division of Corporations

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6384

From: Account Name : GREENSPOON MARDER, P.A.
Account Number : 076064003722
Phone : (888) 491-1120
Fax Number : (954) 343-6962

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: alan.cohn@gmlaw.com

CORPORATION REINSTATEMENT
L & G BUILDERS INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$1,050.00

FILED
12 JUL 19 AM 10:57

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2012 JUL 19 AM 8:08
SUFFICIENT TO REINSTATE

JUL 23 2012
C. MUSTAIN

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 583043

1. Corporation Name

LA GAL BUILDERS, INC.

2. Principal Office Address - No P.O. Box #

1333 DIPLOMAT PARKWAY

Suite, Apt. #, etc.

3. Mailing Office Address

1333 DIPLOMAT PARKWAY

Suite, Apt. #, etc.

City & State

HOLLYWOOD, FL

City & State

HOLLYWOOD, FL

Zip

33019

Country

USA

Zip

33019

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida 08/22/1976

5. FEI Number
59-1935363

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED

7. Name and Address of Current Registered Agent

Name

SANDRA GALIANO

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

1333 DIPLOMAT PARKWAY

Suite, Apt. #, Etc.

City

HOLLYWOOD

State

FL

Zip Code

33019

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0606 or 817.0609, F.S.

Signature of
Registered Agent

Sandra Galiano

Date

7/18/2012

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	SANDRA GALIANO	1333 Diplomat Parkway	Hollywood, FL 33019

10. E-mail Address: ALAN.CORN@GMLAW.COM

(To be used for future annual report notification)

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 807 or 817, 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 807.0401 or 817.0401, F.S., and that all fees owed by the corporation have been paid. I further certify the information included on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.154, F.S.

SIGNATURE:

Sandra Galiano

SANDRA GALIANO

7/18/12

954-920-5058

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

DePhone Phone #

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