

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED  
AND  
FILED

99 DEC 28 PM 1:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **844610**

1. Corporation Name  
**LANCASTER STEEL CO., INC.**

Principal Place of Business <del>1125 NE 7TH AVENUE</del> <del>P.O. BOX 417</del> <del>DANIA FL 33004</del>	Mailing Address <del>1125 NE 7TH AVENUE</del> <del>P.O. BOX 417</del> <del>DANIA FL 33004</del>
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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. <del>1650 S. DIXIE HWY STE 2B</del>	3. New Mailing Office Address, If Applicable Suite, Apt. #, etc. <del>PO BOX 3508</del>	4. Date Incorporated or Qualified To Do Business in Florida <b>11/14/1979</b>
City & State <del>Boca Raton - FL</del>	City & State <del>Boca Raton - FL</del>	5. FEI Number <b>13-5194685</b>
Zip <del>33432</del>	Country <del>USA</del>	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>

1	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
T	VIALE, MARCOS	<del>1125 NE 7 AVE</del> 1650 S. Dixie Hwy Ste 2B	DANIA FL Boca Raton / FL / 33432
P	VISMANTAS, ANDRIUS	1125 NE 7 AVE 1650 S. Dixie Hwy Ste 2B	DANIA FL Boca Raton / FL / 33432
D	FERNANDO MUNOZ	1125 NE 7TH AVE 1650 S. Dixie Hwy Ste 2B	DANIA FL Boca Raton / FL / 33432
			700003095447--6 -01/12/00--01010--012 ****600.00 ****600.00
			700003095447--6 -01/12/00--01010--013 ****158.75 ****158.75

**REINSTATEMENT**

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8. Name and Address of Current Registered Agent <b>VISMANTAS, ANDRIUS</b> 1125 NE 7TH AVE DANIA FL 33004	9. Name and Address of New Registered Agent Name: <b>VISMANTAS, ANDRIUS</b> Street Address (P.O. Box Number is Not Acceptable): <b>620 LAW OFFICES OF DAVID HANNAN</b> <b>7301 NW 4TH ST.</b> Suite, Apt. #, Etc.: <b>SUITE 102</b> City: <b>PLANTATION</b> State: <b>FL</b> Zip Code: <b>33317</b>
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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: *Andrius* REGISTERED AGENT MUST SIGN Date: 12-9-99

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: *MARCOS VIALE* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: 12-9-99 Daytime Phone #: 561-416-0081