PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P02000032860

1. Corporation Name

PRESTIGE ROOFING CONTRACTORS INC.

Principal Place of Business

Mailing Address

6950 SW 47TH STREET MIAMI FL 33155	6950 SW 47TH STREET MIAMI FL 33155				REINSTATE OF STATE OF							
If above addresses are incorrect in any way, line through incorrect information and enter correction below.												
2. New Principal Office Address, If Applicable		New Mailing Office Address, If Applicable				Date Incorporated or Qualified To Do Business in Florida						
Suite, Apt. #, etc.		Suite, Apt. #, etc.				03/26/2002						
City & State		City & State				5. FEI Number 65 - 0368450					\sim \vdash	Applied For
City & State		Only & Glate				6.	62.	- 0 -	368			Not Applicable
Zip 33/83 Country Dade		Zip Country				\$6.75 AG						tional Fee required tificate of Status
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)												
Title(s) Name of Officers and/or Directors					eet Address of Each licer and/or Director			City / State / Zip				
DP IZQUIERDO, FRANCISCO			12642 SW 78TH STREET					MIAMI FL 33183				
_ 8. Name and A	ddress of Current F	Registered Age	nt		Name	9.	Name and A	Address o	f New Re	gistered		•
IZQUIERDO, FRANCISCO Street Address (F.							ONC Box Number	is Not Acc	<u>O</u> eptable)	100	<u>qu</u>	erdo
6950 SW 47TH STREET 26 (ℓ^2	<u>- S</u>		18 3	5 <i>-</i> -	<i>-</i>	
MIAMI FL 33155					Suite, Apt. #, Etc. Lity	n	u`_			State	Zip C	ode 183
10. I, being appointed the registe	red agent of the above	ve named corpo	ration, am fa	amiliar with	and accept the ob	bligat	tions of Secti	on 607.05	05, F.S. o		5, F.S.	
Signature of Registered Agent	SIQNA:	GISTERED AGE		SIGN				Date				
11. I certify that I am an officer or this reinstatement application, owed by the corporation have on this application is true and	the reason for dissolute been paid and the n	lution has been o ames of individu	eliminated, 1 ials listed oi	the corpora n this form	ate name satisfies: do not qualify for a	the r	equirements xemption un	of section	607.0401	or 617.0	401, F.S	., that all fees

SIGNATURE:

SKNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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03 NOV -3 AM 11: 43

SECRETARY OF STATE TALLAHASSEE. FLORIDA

PRESTIGE ROOFING, INC. 12642 S.W. 78th Street, Miami, Florida 33183 Phone (305) 275-9355 Fax (305) 275-8683

October 31, 2003

Division of Corporations Annual Report/Reinstatement Section P.O. Box 6327 Tallahassee, FL 32314-6327

Re: Prestige Roofing Cotractors

To whom it may concern:

Enclosed please find the application mailed to us due to the missing FEI #.

Unfortunately this notice was mailed to our old address and we just received it. Our payment of \$150.00 was mailed back in May, 2003, check #1489.

We understand your department is always busy but we appreciate your prompt attention due to the fact that our insurance company has notify us of cancellation by this Friday.

Thank you for your consideration.

Francisco Izquièrdő