PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
06 MAY 18 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

700076066957
06/12/06--01008--020 **150.00

DOCUMENT # P02000043495

1. Corporation Name
Oakes Interior Construction Inc.

REINSTATEMENT 05-06

CR2E081 (8/05)

2. Principal Office Address	**3.** Mailing Office Address
1258 Rose Gate Blvd.	1258 Rose Gate Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Riviera Beach Fl.	City & State: Riviera Bch Fl.
Zip: 33404 Country: U.S.	Zip: 33404 Country: U.S.

4. Date Incorporated or Qualified To Do Business in Florida: April - 2002

5. FEI Number: 30364 8521 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Gerald H. Oakes

Street Address (P.O. Box Number is Not Acceptable): 1258 Rose Gate Blvd.

700076066957
06/12/06--01008--021 **750.00

Suite, Apt. #, Etc.:

City: Riviera Beach | State: FL | Zip Code: 33404

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Gerald H. Oakes Date: 4/27/06
REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
owner	Gerald H. Oakes	1258 Rose Gate Blvd. Riviera Bch. Fl.	Riviera Bch, Fl. 33404
President	Gerald H. Oakes	1258 Rose Gate Blvd.	Riviera Bch. Fl 33404
Secretary	Gerald H. Oakes	1258 Rose Gate Blvd.	Riviera Bch Fl 33404
Treasurer	Gerald H. Oakes	1258 Rose Gate Blvd.	Riviera Bch Fl 33404

10. 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: Gerald H. Oakes Gerald H Oakes 4/27/06 K. Eckel 561-842-4806 MAY 24 2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #